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US EPA RECORDS CENTER REGION 5



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April 19, 2012

Mr. Doyle Wilson
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Subject: 2010300074 - Winnebago County
Final Remedial Action Completion Report
Source Area 7 Hot Spot Soil Removal
Southeast Rockford Groundwater Contamination Superfund Site
Rockford, Winnebago County, Illinois
Superfund/Technical

Dear Mr. Wilson:

CDM Smith Inc. is pleased to submit two copies of the above-referenced final report for Source Area 7 of the Southeast Rockford Groundwater Contamination Superfund Site, located in Rockford, Winnebago County, Illinois.

If you have any questions or comments, please contact me at (312) 780-7737.

Sincerely,

John Grabs, P.G.
Senior Project Manager
CDM Smith Inc.

cc: Tim Drexler, U.S. EPA



Final Report

Illinois Environmental Protection Agency

Remedial Action Completion
Report

Source Area 7 Hot Spot Soil
Removal

Southeast Rockford
Groundwater Contamination
Superfund Site

April 2012

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Section 1

Introduction

CDM Smith Inc. (CDM Smith), formerly Camp Dresser & McKee Inc. (CDM), received Work Order 11 from the Illinois Environmental Protection Agency (Illinois EPA), under Contract HWA-8308. Under this work order, CDM Smith was authorized to conduct remedial action (RA) oversight (RAO) activities associated with Source Area 7 (Area 7) of the Southeast Rockford Groundwater Contamination Superfund site (SERGC) located in Rockford, Illinois in accordance with the Operable Unit 3 (OU3, or Source Control Operable Unit) Record of Decision (ROD) (U.S. EPA 2002).

This report documents the hot spot soil removal RA that was conducted under an Explanation of Significant Differences (ESD) (Illinois EPA 2010). This RA is separate from other remedial actions that will be performed in the future to achieve cleanup goals in accordance with the ROD.

1.1 Purpose and Organization

The purpose of this RA report is to provide information regarding the implementation of the hot spot soil removal RA at Area 7. This RA report was completed after the operational and functional (O&F) determination. The remedy was deemed O&F on November 21, 2011 after the final inspection had been completed.

In accordance with the EPA guidance for NPL site close-out procedures (U.S. EPA 2000), this report is organized into the following sections:

- **Section 1 – Introduction:** provides a site description and site history for Area 7.
- **Section 2 – Source Area 7 Description:** provides a summary of the ROD and ESD requirements, remediation goals for both, and other characteristics of the hot spot soil removal for Area 7.
- **Section 3 – Construction Activities:** provides a summary of the RA construction activities conducted.
- **Section 4 – Chronology of Events:** provides a detailed chronology of major events for Area 7 starting with the signing of the OU3 ROD up to present day.
- **Section 5 – Performance Standards and Construction Quality Control:** provides a description of overall performance of the construction completion, a description of sampling strategy and rational, and an assessment of data quality.
- **Section 6 – Final Inspections and Certifications:** provides a summary of Site inspections and certifications including the O&F determination.
- **Section 7 – Long Term Monitoring Plan Activities:** provides a description of post RA monitoring activities.

- **Section 8 – Summary of Project Costs:** provides a summary of project costs associated with the RA to date and a comparison of actual costs versus the original proposed costs.
- **Section 9 – Observations and Lessons Learned:** provides a description of construction issues related to the RA implementation.
- **Section 10 – Source Area 7 RA Contact Information:** provides a list of contact information for personnel involved in the Area 7 RA, including U.S. EPA personnel, Illinois EPA personnel, and RA contractor personnel.

1.2 Site Name, Location, and Description

The Southeast Rockford Groundwater Contamination Site is located in the southeast portion of Rockford, Illinois and covers an area approximately 3 miles long by 2.5 miles wide and has three operable units (OUs):

- Operable Unit 1 (OU1): Drinking Water Operable Unit
- Operable Unit 2 (OU2): Groundwater Operable Unit
- Operable Unit 3 (OU3): Source Control Operable Unit

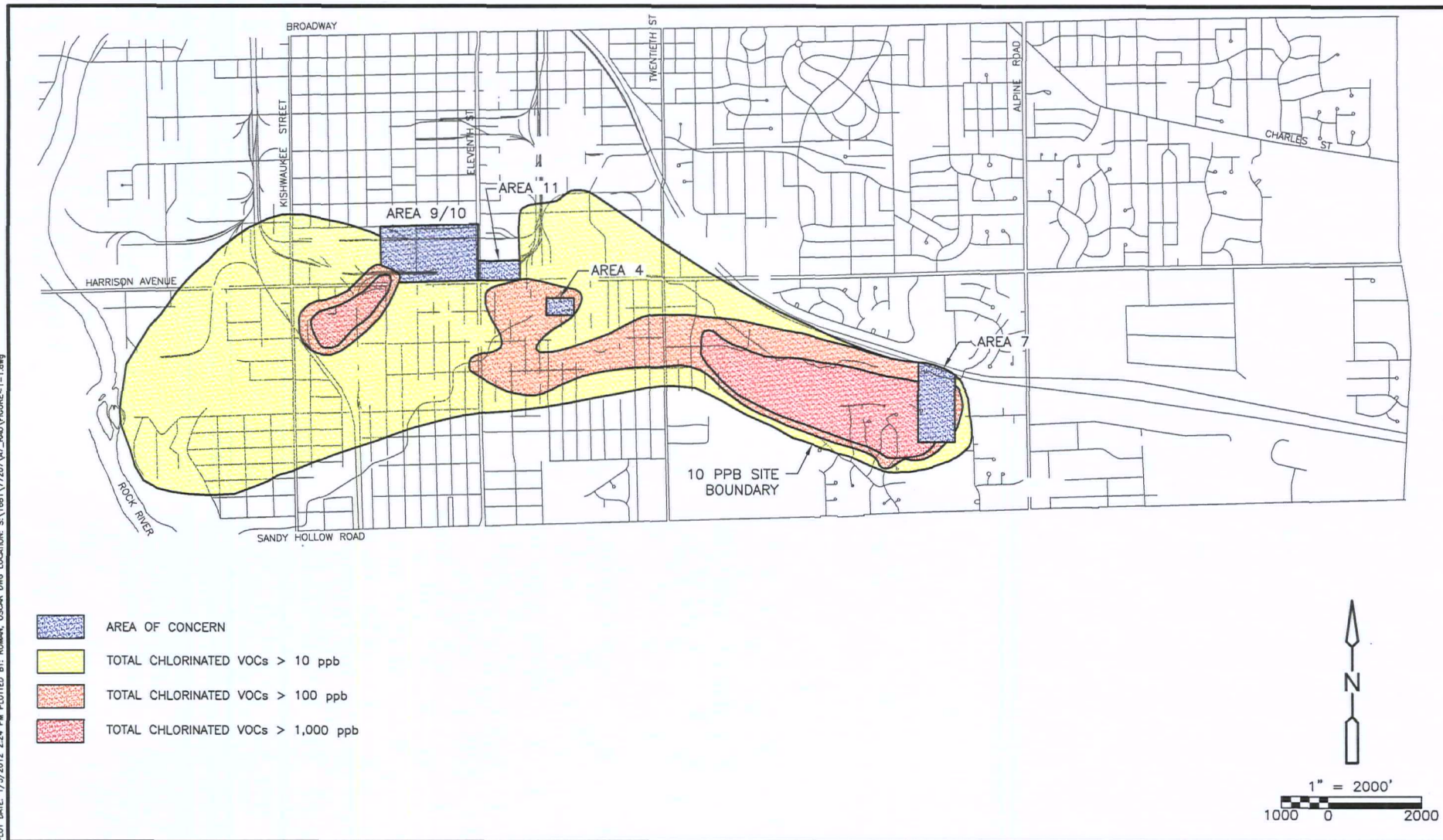
OU1 focused on providing local residents with a safe supply of drinking water, while OU2 addressed the area-wide groundwater contamination. A remedial investigation was conducted for OU2, which identified the primary source areas for groundwater contamination. These source areas include Areas 4, 7, 9/10, and 11. The contaminant plume in the groundwater with total chlorinated volatile organic compounds (VOC) concentrations above 10 parts per billion (ppb) defines the boundaries of the Southeast Rockford Superfund Site, as defined by the OU2 ROD (U.S. EPA 1995). The extent of the Southeast Rockford Groundwater Contamination Site is shown in **Figure 1-1**.

OU3 began as a state-lead action in May 1996 to select remedies for each of the source areas. Additional investigations were conducted for OU3 to determine the best course of action to clean up the source areas. The ROD for OU3 contains the actions, alternatives and preferred options for remediation of the source area contamination. However, the RA discussed in this report was not a remedy selected in the ROD and was implemented through an Explanation of Significant Differences (ESD) to remove fine-grained, significantly contaminated soils that serve as source contamination at source Area 7.

Area 7 is located in the most southeastern portion of the Superfund site, northwest of the intersection of Alpine and Sandy Hollow Road. Area 7 is primarily a grassy area located at the eastern end of Balsam Lane (**Figure 1-2**). Area 7 contains Ekberg Park, an open field and a wooded area. Ekberg Park is owned and operated by the Rockford Park District and the remainder of Area 7 is owned by Glen Ekberg. The topography slopes gently to the north towards an intermittent creek. Ekberg Park consists of a basketball court, tennis court and a playground. Residences border the area to the west and southwest (hydrogeologically downgradient) and about 0.1 mile away to the east (hydrogeologically upgradient).

Area 7's stratigraphy is characterized as a heterogeneous assemblage of unconsolidated and discontinuous sands, silts, and clays that overlie dolomite bedrock. This type of geology is consistent with the past reports of quarrying. An east-west trending buried bedrock valley roughly parallels the present-day creek valley. Groundwater flow in both the unconsolidated and bedrock aquifers is to the northwest, with localized discharge of shallow groundwater to the creek. Depth to groundwater ranges from about 75 feet at the south end of Area 7, to 36 feet south of the park, to 13 feet within the park to less than 2 feet near the creek. Depth to groundwater varies seasonally and is highly dependent on precipitation events.

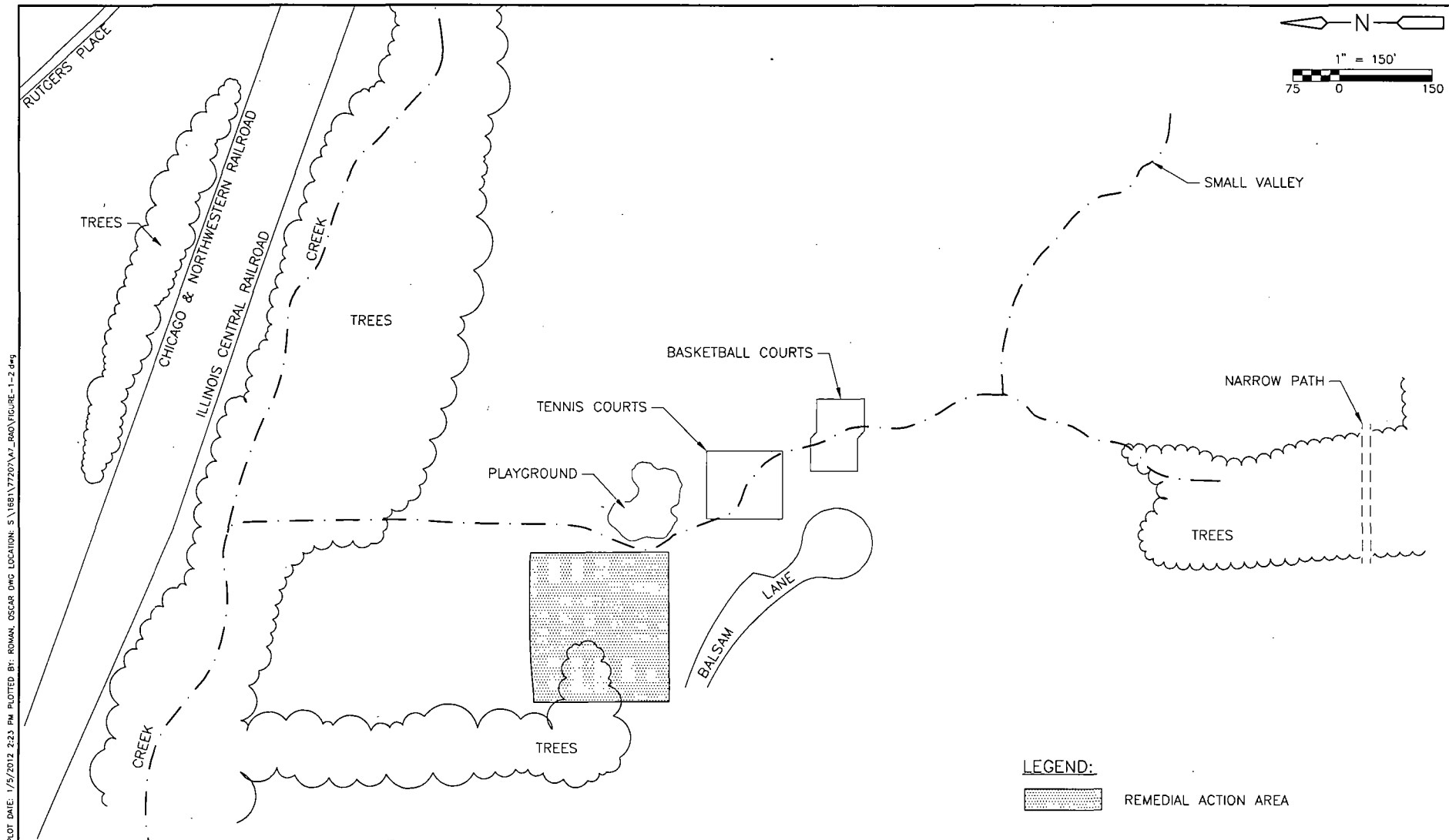
Plot Date: 1/2/2012 2:24 PM Plotted By: ROMAN, OSCAR DWG Location: S:\1681\77207\A7_RAO\Figure-1-1.dwg



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Figure 1-1
Southeast Rockford Groundwater Contamination Superfund Site
Rockford, IL



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Figure 1-2
SITE LOCATION MAP
SE ROCKFORD SOURCE AREA 7

1.3 Site History

Source Area 7 has a history of unregulated disposal activity which is suspected to have begun sometime in the early 1950's. Part of the history of this area includes a former gravel pit. There is evidence of ground disturbances in historic aerial photographs. Specifically, the photographs show evidence of excavation and disturbed ground in two large areas approximately 600 and 1300 feet east of Balsam Lane and evidence of disturbance at former small tributary valleys. In addition, the Illinois EPA had received numerous reports of illegal dumping in this area.

In 1981, the City of Rockford discovered groundwater contamination at the property that would eventually become part of the Superfund Site. From 1981 to 1997, the Illinois EPA and the Illinois Department of Public Health (IDPH) performed investigations at the site that revealed that VOCs were present in soil and groundwater. During this and subsequent investigations, numerous contaminants of concern (COC) were identified including 1,1-dichloroethene (1,1-DCE), 1,1,1-trichloroethane (TCA), 1,1,2-trichloroethane (1,1,2-TCA), trichloroethylene (TCE), tetrachloroethene (PCE), and carbon tetrachloride (carbon tet). The Site was proposed for listing on the NPL in the Federal Register on June 24, 1988, and was formally added to the NPL on March 31, 1989 as a state-lead, federally-funded Superfund site. The Record of Decision (ROD) for OU3 of the Site was signed by the Illinois EPA Director on May 8, 2002 and by the United States Environmental Protection Agency (U.S. EPA) Superfund Division Director on June 11, 2002. The Southeast Rockford Groundwater Contamination Superfund Site is identified by the Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) identification number of ILD981000417.

1.4 Regulatory Enforcement Activities

There have been three major enforcement agreements developed between the U. S. EPA, Illinois EPA and parties associated with the Southeast Rockford site. The first of these was a consent decree entered by the federal district court in Rockford in April 1998. This decree required the City of Rockford to install water mains and services within the public right-of-way, provide needed connections to homes and businesses, supplement the previously existing groundwater well-monitoring network with new wells, and commence a long-term groundwater sampling and analysis program. This work has entered the monitoring phase. Over 9,200 feet of new water mains have been installed, and an additional 262 individual water service connections have been made. A total of nine new groundwater monitoring wells were installed, with several of these located near the Rock River. The consent decree also required the payment of up to \$200,000 by the City of Rockford to the State of Illinois and federal government for future oversight costs.

In January 1999, the court entered a second consent decree which provided for the reimbursement of approximately \$9.1 million dollars for past expenditures for responses to the Southeast Rockford site by the federal and state agencies. Additionally this consent decree provided for the payment of \$6 million for a portion of the future cleanup costs for Area 7. This feature of the decree was included because it is believed that waste materials were brought to Area 7 from other locations so this payment was contributed by many industrial and commercial enterprises in the Rockford area. In September 2001, this consent decree was amended and resulted in the collection of an additional \$140,000.

A cost recovery consent decree concerning Area 7 was entered into the court on August 28, 2006. This decree was negotiated with the current owner of a major portion of Area 7 and provides for payment by the owner of \$1,231,125 to U.S. EPA. Additional conditions of the decree include access for U.S. EPA, Illinois EPA and their recognized contractors in the performance of the remedial design and remedial actions at Area 7.

1.5 Investigation Activities

This section presents a brief summary of previous investigation activities at Area 7, significant findings of the RI, FS, and pre-RD characterization activities, as well as previous remedial actions conducted.

1.5.1 Remedial Investigations and Feasibility Studies

The Phase I Remedial Investigation (RI) for the Southeast Rockford Groundwater Contamination Site was conducted from May to October of 1991 and consisted primarily of a site-wide soil gas survey, monitoring well installation, and groundwater sampling and analysis to investigate multiple suspected source areas.

The investigation of a potential source in Area 7 was sparked by elevated concentrations of contaminants in the shallow monitoring well of a three well cluster immediately downgradient of Area 7. Because elevated concentrations of contaminants were only found in the shallow well it was assumed that the source was close to the well and a review of historical aerial photographs was conducted to identify site activities that were suspect. Based on the information from these tasks, additional field surveys were performed to identify potential areas of contamination within Area 7. These additional activities were conducted from March 1992 to May 1992 and included geophysical surveys and soil gas sampling. The geophysical surveys indicated several areas of subsurface anomalies which were subsequently investigated with soil gas sampling. Soil gas results indicated that high concentrations of VOCs, primarily TCA, were present in the subsurface with the highest concentrations found in a north-south trending band along the western and northern valleys. The target compounds PCE and TCE were also detected in Area 7 with PCE being the second most abundant compound and TCE the least. During Phase II of the RI, additional work was conducted in Area 7 consisting of test-pit investigation, surface and subsurface soil sampling, and monitoring well installation.

The Phase II site-wide groundwater investigation conducted concurrently also indicated the same contaminant mix of TCA, PCE and TCE downgradient, confirming that the subsurface in Area 7 was impacting site-wide groundwater. In August 1993, residential air sampling was conducted near Area 7 to determine if the soil and groundwater contamination was affecting indoor air quality in homes near the source. The VOCs detected in the indoor air samples were consistent with those detected in the soil gas but were not found to be present at levels above health-based guidelines. Additional indoor air sampling was conducted in Area 7 in July 2003 and evaluated using more recently developed soil vapor intrusion modeling guidelines. This indoor air evaluation indicated that the migration pathways are generally inadequate or incomplete and do not result in indoor air concentrations at levels that present an unacceptable health risk.

The Remedial Investigation Report for the site-wide groundwater investigation and source area identification was completed by CDM Smith (CDM 1995) and resulted in the signing of the OU2 ROD which required additional extension of the City of Rockford municipal water system and selected natural attenuation, long-term groundwater monitoring, and source control measures that would be determined in the future under the SCOU.

The SCOU RI and Focused Feasibility Study (FFS) reports were completed in July 2000. The SCOU FFS addressed contaminated soils, non-aqueous phase liquids (NAPL), and leachate considered to be principal threat wastes and the primary causes of groundwater contamination at the four primary source areas. Alternatives developed in the SCOU FFS were separated into soil and leachate alternatives. In order to simplify the OU 3 ROD, technologies intended to contain and/or treat contaminated groundwater in the immediate vicinity of the four primary source areas were considered leachate alternatives.

According to the SCOU investigation results, elevated concentrations of toluene, ethyl benzene, xylenes, and chlorinated volatile organic compounds (VOC) were found in Area 7 soils. The previous remedial

investigation identified subsurface contamination along the drainage ditches in the southern portion of Area 7. The SCOU investigation confirmed that an additional hot-spot area of soil contamination exists in and to the west and northwest of Ekberg Park. Elevated levels of VOCs were also found in the groundwater and in the surface water of the intermittent creek located on the property. Based on the soil and groundwater data, it was determined that the shallow groundwater from Area 7 locally discharges to the creek. Shallow groundwater downgradient of Area 7 contains elevated concentrations of TCA as the primary soil contaminant and lesser concentrations of various other VOCs. Non-aqueous phase liquids (NAPL) were found in soil 11 feet below the groundwater table in a soil boring in the park. Additionally, Area 7 was found to have areas of highly contaminated silt and clay units indicating that NAPL has migrated into these fine-grained sediments.

1.5.2 Pre-Design Activities and Pilot Testing

Soil gas samples collected during the multiple phases of investigation at Area 7 indicate that the highest soil gas concentrations are found along the former valleys within Area 7, which extend from south to north as far as the intermittent creek. Contamination in soil gas to the north along the valley had not been previously delineated and additional soil gas sampling to determine the extent of contamination to the north was performed as part of the Area 7 pre-design activities. To the south, east and west, VOC contamination in soil gas was delineated in the remedial investigation phase. To the west, which is the downgradient direction and the closest to area residences, soil gas concentrations reached non-detectable concentrations approximately 500 feet east of Bavarian Lane, which is the eastern most north-south street for the downgradient residential area.

The nature and extent of contamination at Area 7 was subsequently refined during pre-design field studies that were conducted between August 2004 and June 2005 and documented in Technical Memorandum – Final, Southeast Rockford Groundwater Contamination Superfund Site, Source Area 7 Pre-Design Field Study dated October 12, 2005. The technical memorandum is summarized below.

1.5.2.1 Soil Gas

Soil gas sampling was conducted to further define the extent of subsurface VOC contamination in the northern portion of Area 7. Previous investigations did not fully confirm the extent of areas with VOC contamination in the subsurface to the north of the park playground and south of the creek. Additionally, the areas where recent dumping of debris had occurred were investigated to the extent practicable.

The results of the August 2004 soil gas sampling were consistent with the results of the previous soil gas surveys. The highest VOC concentrations were detected adjacent to the northwest corner of Ekberg/Pine Manor Park. As in the previous soil gas surveys TCA, was generally the most abundant compound detected. These results indicated that the Area 7 source area extends approximately 100 feet north of Ekberg/Pine Manor Park.

1.5.2.2 Soil

Based on the results of the soil gas sampling, soil sampling locations were selected to define the extent of subsurface VOC contamination in the northern portion of Area 7. Evidence of free phase product and elevated concentration of VOCs were observed in subsurface soils to the north of Ekberg/Pine Manor Park. The distribution of contaminants was consistent with the results of the soil gas sampling results and identified portions of the northern most hotspot. The location of the northern most hot spot identified in the August 2004 soil sampling was consistent with previous soil sampling.

1.5.2.3 Groundwater

The results of the groundwater investigation indicated that the distribution and concentration of contaminants within groundwater monitoring wells were generally similar to results from previous

sampling investigations. The highest concentrations of VOCs were observed within the unconsolidated aquifer at monitoring well location MW-134A. Monitoring well MW-134A is located immediately downgradient of the area excavated for this RA

The results of the groundwater sampling from newly installed wells (MW135B, MW143, MW144, and MW145) in the southern portion of Area 7 also showed significant downgradient VOC contamination. These results also indicated that the VOC source extended further to the south than previously believed. Additional groundwater monitoring wells were installed in August 2010 to define the southern extent of VOC groundwater contamination.

1.5.2.4 2005/2007 Geophysical Surveys

The first geophysical investigation was conducted during December 2005 only on Ekberg Park because of property access restrictions. The second investigation was conducted during December 2007 and included the remainder of Area 7.

Although previous geophysical surveys had been conducted at Area 7, the 2005 survey was conducted specifically to investigate the existence of a drainage tile reportedly installed through Area 7 that could be acting as a preferential pathway for contaminant migration through Area 7. The 2005 survey indicated the likely presence of the drainage tile, but also indicated the likely presence of source material in Ekberg Park that was subsequently confirmed and used as the pilot test and pump test location. Although the location of source material at Area 7 was generally known, the confirmation of source material with the geophysical survey was critical because the source material had not been so accurately and easily located during previous investigation activities at Area 7. Therefore, it was determined that the remainder of Area 7 should be surveyed.

The 2007 geophysical survey tentatively identified source material farther to the south and east of where it was previously thought to exist – almost to the southern property boundary of Area 7.

1.5.2.5 Pilot Test and Pump Test

A pre-design pilot study was conducted in Area 7 during May and June 2007 for use in preparation of the Area 7 RD. The work included the installation of groundwater extraction wells, piezometers, and vapor monitoring points; groundwater sampling; soil vapor extraction (SVE) testing; multi-phase extraction (MPE) testing; and aquifer property testing.

The pilot test performed in the area just to the west of the playground equipment revealed a large plume of soil and groundwater contamination. A pump test conducted in this area revealed that the subsurface consists of very fine grained materials. Contamination was found between 4 and 15 feet below the ground surface, much shallower than first indicated by earlier investigations. The nature of the glacial deposits at this specific location and the soil borings indicated that the contamination would be held in place significantly longer than previously anticipated, due to the fine grained materials.

1.5.2.6 2010 Pre-Design Subsurface Investigation

An additional pre-design subsurface soil investigation was performed in August 2010 to fill the data gaps identified by the 2007 geophysical survey and to define the southern extent of soil and groundwater contamination. The investigation determined that the majority of the subsurface contamination is present along the small valleys in the southern portion of the site at depths ranging from 12 ft to 40 ft bgs. The contamination is present both above and below the water table and the subsurface in these areas is characterized as heterogeneous with discontinuous layers of low permeability materials.

Section 2

Source Area 7 Description

This section presents background information on the Site including the following:

- Remedial action objectives (RAO) developed in the OU3 ROD for Area 7.
- A summary of remedies selected in the OU3 ROD for Area 7.
- A description of the remedy and RD summary of the hot spot soil removal ESD for Area 7, which is the subject of this RA completion report.

2.1 Remedial Action Objectives

This section describes the development of RAOs for Area 7.

Remedy selection was based upon the nature and extent of contamination, as well as consideration of the types of and uses of the properties in each area. The remedies described in the OU3 ROD were selected to accomplish the following results: (1) stop on-going contamination of the groundwater, thus protecting the water resources for future generations; (2) ensure that VOCs in soil gas do not move into the basements of nearby residences; (3) protect people from ingestion of contaminated groundwater; (4) reduce the risk of direct contact with contaminated soil or free product beneath the ground surface; and (5) assure the project is in compliance with the OU2 ROD provisions that required controlling sources of groundwater contamination.

Based on remedial investigations and a site-specific risk assessment, remedial action objectives (RAOs) were developed. The following RAOs apply to all four Source Areas:

- Prevent the public from ingestion of soil, and direct contact with soil containing contamination in excess of state or federal standards or that poses a threat to human health
- Prevent the public from inhalation of airborne contaminants in excess of State or federal standards or that pose a threat to human health
- Prevent the further migration of contamination from Source Area 7 that would result in degradation of site-wide groundwater or surface water to levels in excess of State or federal standards, or that pose a threat to human health or the environment

Area 7, because of its unique characteristics as a park containing a creek, has these RAOs in addition to the general RAOs listed above:

- Prevent the public from ingestion and direct contact with surface water containing contamination in excess of state or federal standards or that poses a threat to human health
- Prevent the migration of contamination from Source Area 7 that would result in degradation of surface water and sediment in the unnamed creek to levels in excess of state or federal standards or that pose a threat to human health or the environment

- Prevent the ingestion of vegetables from Source Area 7 through the implementation of appropriate institutional controls

2.2 Selected Remedies – OU3 ROD

Source Control Alternatives developed within the OU3 FFS and discussed in the ROD were separated into soil and leachate alternatives. (Leachate is assumed to be contamination that originated from the soil source areas and has migrated to the unconsolidated aquifer within the designated source areas.) In some cases, technologies designed to remediate soil, NAPL and leachate contamination are either not sufficient to protect human health and the environment, or they are not practical solutions. In these cases, technologies were considered to contain, rather than treat the resulting groundwater contamination. In order to simplify the ROD, technologies intended to contain contaminated groundwater in the immediate vicinity of the four primary source areas are considered leachate alternatives.

A number of potential remedial action alternatives for Source Area 7 were developed and evaluated based on RAOs, remediation goals and comparative evaluation criteria. The detailed comparative analysis of Source Area 7 remedial alternatives is discussed in detail in the OU3 ROD. Based on the comparative analysis, the following remedies were selected for the soil and leachate components at Area 7:

- **Soil** - Soil vapor extraction (SVE) and air sparging with vapor treatment by catalytic oxidation
- **Leachate** - Multi-phase extraction and leachate containment/collection with treatment by air stripping and on-site surface discharge/groundwater-use restrictions

Additional information regarding the selection of these remedies can be found in the OU3 ROD. RD activities for both remedies were substantially completed in December 2011.

2.3 Selected Remedy – ESD

Results of the pilot testing performed in 2007 concluded that vadose zone soils in the area of the hot spot were generally impermeable and not conducive to remediation by SVE. In addition, during the installation of the pilot test wells, fill and soil contamination was encountered as shallow as four feet bgs with heavily impacted soil, including NAPL, slightly deeper. Therefore, it was determined that excavation with off-site disposal would allow for an immediate reduction in contamination that would augment and subsequently reduce the time required for the full-scale remediation that will eventually be implemented in accordance with the ROD.

The ESD was signed by Illinois EPA on March 3, 2010 and by USEPA on May 3, 2010. The following benefits of the excavation were cited in the ESD:

- Excavation removes groundwater contamination source material quickly and permanently. Removal of this hot spot will allow the proposed SVE/AS system for Source Area 7 to be more cost efficient and streamlined.
- Excavation is guaranteed effective. Prior to shut down, the SVE system will require verification of effectiveness via soil sampling once VOC levels in the SVE vapor drop off. There is no guarantee at that point that a sufficient amount of contamination will have been removed from the hot spot to allow certification that the remediation is complete.
- Excavation is easily implemented and easily verified for completion. Unlike SVE, there will be no need to periodically assess the effectiveness of the excavation or spend time every month to tweak or upgrade the remedy every few years, with no guarantee of ultimate success.

- Excavation will quickly eliminate releases to air. Low levels of several site-derived VOCs have been detected in ambient air in parts of Source Area 7 as well as in some indoor air. Although these levels do not constitute a substantial health risk as determined by studies of potential vapor intrusion in the nearby neighborhood, excavation in the hot spot area would further mitigate releases from this area to ambient air once the excavation was performed and more rapidly eliminate releases to indoor air. SVE/AS would slowly reduce the risk to ambient and indoor air over a period of several years to several decades. Given that this hot spot area is adjacent to the park, removing this risk to young children would be especially beneficial.
- Excavation should substantially reduce the time required for the leachate and groundwater remediation. The quicker the bulk of the source is removed, the quicker the groundwater contamination will be reduced to acceptable levels. This includes the contaminated leachate beneath Source Area 7 as well the contaminated groundwater beneath the site as a whole. Because Source Area 7 is a major source of contamination to the Southeast Rockford groundwater plume, source removal at this location has the potential to substantially decrease contaminant concentration in a large area relatively quickly. This remediation will lower long-term monitoring cost and allow the aquifer to be returned to beneficial use in a shorter time span.

2.3.1 ESD Design Summary

The Hot Spot Soil Removal RD was prepared as a performance-based design to remove the greatest volume of highly contaminated, fine grained source material as possible. The depth of the excavation would be limited to just below the water table to avoid large-scale dewatering or specialized shoring of the excavation, both of which would dramatically increase the cost of the RA.

Pre-design field studies to delineate the material targeted for excavation was conducted in October 2010 and documented in CDM Smith's January 10, 2011 Technical Memorandum Southeast Rockford Groundwater Contamination Superfund Site, Source Area 7 Pre-Design Geoprobe Field Study. Soil samples were collected using a direct-push rig and screened with a photoionization detector (PID). As part of the investigation, a total of 51 soil borings were advanced to 16 feet below ground surface (bgs) along a grid system to delineate and characterize highly contaminated soil that would be excavated in accordance with the ESD.

The results of the field investigation combined with information from previous studies in the area provided the basis of the Limited Soil Excavation RD produced in March 2011. A sheet from the RD that shows the planned excavation footprint is provided in **Appendix A**.

Section 3

Construction Activities

This section provides a summary description of the activities undertaken to implement the Southeast Rockford Area 7 hot spot soil excavation RA including mobilization and site preparation, construction excavation, and site cleanup and restoration.

Soil excavation activities and confirmation soil sampling were conducted by Bodine Environmental Services, Inc. (Bodine). CDM Smith performed RA oversight of excavation activities, site preparation, and soil sampling. Laboratory analyses were completed by Test America of University Park, Illinois, under subcontract to Bodine. Transportation of impacted soil was performed by Bodine's subcontractor, licensed special waste hauler, RA Seaton Trucking, of Belvidere, Illinois. The impacted soils were transported to and disposed at Veolia's Orchard Hills Landfill in Davis Junction, Illinois (Veolia). Based on the waste characterization analytical results, VOC-impacted soils removed were disposed of under Veolia Waste Profile OHL00942 as non-hazardous special waste. CDM Smith field scientists documented field activities on a daily basis and reviewed waste manifests with the corresponding weights of soil transported off-site for disposal. A summary of waste disposal documentation is included in **Appendix B**. Waste manifests and landfill weight receipts were provided to Bodine from Veolia and summarized for CDM Smith on a regular basis to maintain proof of proper landfill disposal and/or waste water treatment. Site progress, observations, and issues were photographed by CDM Smith's field scientists and are provided as a photolog in **Appendix C**.

3.1 Mobilization and Site Preparation

Prior to commencement of major construction activities at the Site, several activities were conducted, including access road construction, clearing and grubbing, installation of installation of silt fence and other erosion control features, and utility locating.

3.1.1 Access Road Construction

Bodine constructed an approximately 2,500 ft long gravel haul road connecting Ekberg/Pine Manor Park with South Alpine road, at approximately 200 feet north of O'Connell Street. Haul road construction began with equipment mobilization, grading, and debris removal on December 15, 2010. RA Seaton Trucking, a subcontractor to Bodine, delivered CA-6 (with fines) material from Ekberg Material Inc., of Rockford, Illinois for road construction. The width of the road varies between 12 and 15 feet with a thickness of approximately 5 inches. Additional gravel was used in a low area at the west end of the road. The thickness of gravel in this area was increased to approximately 12-20 inches to bring the road up to an appropriate grade and provide additional structural support. The width in the last 100 feet of the road measures approximately 50 feet to allow for suitable truck turn-around and staging. The haul road was completed on December 20, 2010. Care was taken during construction to protect utility and municipal structures, employ Best Management Practices (BMP), and maintain site security. Maintenance of the haul road, including adding additional loads of CA-6 stone to low areas of the road, was subsequently performed as needed during the RA. The additional CA-6 stone was sourced from Quality Aggregate Stone Quarry of Cherry Valley, Illinois. A summary of stone material quantities used for haul road construction are provided in **Table 1**:

Table 1. Haul Road Construction Summary

Material	Quantity (tons)	Use on Site
CA-6	1,438.14	Road construction
CA-6	693.79	Road repair, pad for frac tank, etc.
3" Clean Stone	203.98	Improve haul road soft spots

3.1.2 Well Abandonment

Existing wells within the planned excavation footprint were abandoned in accordance with applicable Illinois regulations. CDM Smith performed oversight for the abandonment of seven monitoring wells (MW-2, MW-3, PZ-2, SVE-1, DPE-2, VMP-1, and VMP-2) on April 5, 2011. Jackie Hatfield of the Winnebago County Health Department also observed the well abandonment. The abandonment process included adding a small quantity of bleach to the well followed by slowly adding 3/8-inch bentonite chips, cutting the PVC pipe to 2 feet bgs, and backfilling the void with soil at each well. All well abandonments were completed without issue. Illinois Department of Public Health Division of Environmental Health Water Well Sealing Forms that were completed and submitted to the Winnebago County Health Department are provided in **Appendix D**.

3.1.3 Site Preparation

Bodine completed all site clearing, grubbing, before starting excavation activities. A 20,000-gallon frac tank, excavating equipment, and an emergency spill kit were mobilized to the site. These items were all placed within an area surrounded by a chain-link security fence. During excavation activities, temporary orange construction fencing was placed around the open excavation during offsite/non-working hours for additional security.

3.1.4 Erosion and Sedimentation Controls

Prior to the start of work, silt fence was installed at the perimeter of the work area as required by the technical specifications. The silt fence was repaired and/or reattached to the chain link security fence, as needed, during the course of the RA work activities.

3.1.5 Utility Location and Modification

Prior to commencing construction activities, Bodine contacted the Joint Utility Location Information for Excavators (JULIE) one call entity for marking subsurface utilities throughout the proposed work area. No utilities were identified within the RA work area.

3.2 Air and Dust Monitoring

CDM Smith monitored and recorded ambient air conditions during RA excavation activities. Constant air monitoring, via PID, was performed during intrusive activities. Ambient air conditions immediately downwind of the excavation ranged in concentration between 0.1 part per million (ppm) and a recorded high of 24.3 ppm, while generally staying within a range of 1 ppm to 7 ppm. Elevated PID readings (> 5ppm) were common, but of short duration as a specific scoop of soil was being removed. PID readings outside the security fence remained at or below the background level of 1.2 ppm.

Bodine also performed particulate dust monitoring on April 13, 2011. A stationary dust monitor was staged downwind near the Alpine Road haul road access gate. The ambient air was assessed for 437 minutes, with concentration of dust ranging from 0.011 milligram per cubic meter (mg/m³) to 0.979

mg/m³, with an average concentration of 0.025 mg/m³. Analytical laboratory results reports for the air monitoring events are provided in **Appendix E**.

Bodine maintained excavations, stockpiles, and all other work areas within the project boundaries free from dust by continuously monitoring the air around the work site with a dust meter during RA work activities. On an as needed basis, Bodine implemented dust suppression measures by watering the Site from a 500-gallon polytank on the back of a truck whenever visible dust was observed in the air within the work area. The RA event experienced regular rainfall on most days of construction and thus, dust suppression was not needed regularly.

3.3 Excavation Activities

Excavation activities were initiated at the Site on April 5, 2011 and completed on April 26, 2011. A total of 5,372 tons of VOC-impacted soils were removed from the hot spot(s). **Table 2** summarizes the dates and quantities of impacted soil for off-site disposal. The excavation activities were designed as adjacent north and south excavations; however, the separate excavations were eventually joined based on field conditions and observations (staining, odors, elevated PID readings). This additional excavation work was determined to be necessary in consultation with Illinois EPA.

Table 2. Soil Disposal Summary

Date	Loads	Quantity (tons)
4/05/11	33	478.21
4/06/11	36	627.21
4/07/11	19	313.55
4/12/11	48	892.28
4/13/11	50	936.67
4/14/11	16	309.19
4/18/11	22	417.66
4/20/11	26	444.76
4/21/11	24	425.77
4/26/11	30	526.71
Total soil disposal		5,372.01 Tons

CDM Smith performed RA oversight on a daily basis to monitor soil characteristics such as staining, odors, and material type; ambient air conditions with a PID; site progress; and reconcile landfill documentation with daily site activities. Daily update reports summarizing site activities, progress, and issues were provided to Illinois EPA.

3.3.1 Hot Spot Excavations

Excavation activities were conducted at the Site April 5 through 26, 2011; starting from the south end of the southern hot spot and concluding at the north end. Observations of stained soils, free product, within the excavation resulted in additional soil excavation along (1) the eastern sidewall at the south end of the excavation, (2) the entire area between the planned southern and northern hot spots, thus joining them into one excavation area, (3) the western wall of the northern third of the planned northern hot spot, and (4) the northeastern corner. In addition, the excavation extended down to 12 feet bgs at the southern end

to approximately 8 feet bgs at the northern end of the excavation. This apparent slope in the excavation floor is actually the result of ground surface sloping down to the north.

The final extent of excavation was documented by site surveyors R.K Johnson & Associates, Inc of Loves Park, Illinois (**Appendix F**). The surveyors recorded corner points of the backfilled excavation after completion of stone backfilling on May 26, 2011 to document the lateral extent of excavation limits. The total area of the excavation was determined to be 10,175 square feet.

Noteworthy observations of excavated soils and RA activities include:

- Several buried and smashed, approximately 30 gallon size, drums found on April 5, 2011 (Photo No. 7, **Appendix C**)
- Gray “goo” that appeared to be in one of the drums found on April 5, 2011 (Photo No. 8, **Appendix C**)
- Several ounces of free product in a small puddle at the base of the excavation on April 12, 2011. (Photo No. 8, **Appendix C**) The approximate location of the free product was at the northeast corner of the southern excavation area (prior to extension to meet northern hot spot).
- Sheen regularly observed on accumulated water within the excavation while excavating the southern and central portions of the hot spot (Photo No. 14, **Appendix C**)
- Areas of fill that consisted primarily of bottles, jars, and other glass debris.

3.3.2 Soil Sampling

Soil sampling was not planned or included in the RA planning documents because it was known that significant contamination would remain below the floor of the excavation and previously collected soil samples provided information regarding this contamination. However, during the RA, CDM Smith, Bodine, and the Illinois EPA agreed that a limited number of soil samples should be collected from the excavation to document residual contamination for future RA planning. Soil sampling activities were not conducted under an approved SAP or QAPP and no quality control samples were collected; therefore, the analytical results are considered screening level data.

Seven soil samples (A through G) were collected from the base of the excavation at depths of 12 – 12.5 feet bgs in the southern portion of the excavation, 10 – 10.5 feet bgs in the central portion, and 7.7 – 8 feet bgs at the north end of the excavation. Soil samples were analyzed for VOCs by EPA Method 8260B. The approximate sampling locations are shown on the excavation extent drawing in **Appendix F** and detection summaries from analytical reports are provided in **Appendix G**. The sample name of each sample integrates the depth from which the sample was collected.

In general, the analytical results indicate that significant contamination remains below the floor of the excavation.

3.4 Liquid Disposal

Periodically, surface water drainage and seeped groundwater was observed at the base of the excavation during RA activities. Bodine’s vacuum truck and frac tank were utilized to remove and store the accumulated water. Approximately 18,330 gallons of contaminated water was placed in the frac tank during the hot spot RA over nine separate pumping events.

Bodine collected water samples from the frac tank for waste characterization on May 24 and June 1, 2011. The water was transported by Advanced Waste Carriers, Inc. of Rockford, Illinois to Advanced Waste Services - Chemworks treatment facility in Milwaukee, Wisconsin as special waste under waste profile 41449115-X-B2 on June 13 and 14, 2011. Documentation of waste characterization sampling, analytical results reports, and waste manifests are provided in **Appendix B**.

3.5 Backfilling Activities

The hot spot excavation was backfilled with CA-7 stone as the excavation progressed so as not to maintain open excavations during the RA. The CA-7 backfill was sourced from Quality Aggregate Stone Quarry of Cherry Valley, Illinois. Backfilling activities began on April 7, 2011 and continued throughout and following completion of hot spot excavation activities. A total of 4,334 tons of CA-7 were utilized to backfill the excavation area to approximately seven inches below grade. CA-7 stone backfilling activities are summarized in **Table 3**. Topsoil, sourced from Slabaugh Services of Rockford, Illinois was delivered to the Site on June 7 and 8, 2011 and placed within the excavation to complete the backfilling process. Approximately 724 cubic yards of topsoil were used for backfilling and landscaping at the Site. The topsoil was stripped and pulverized from a former farming property. Source documentation and results of analytical testing of the granular and topsoil materials are provided in **Appendix H**. Site grading activities were completed on June 17, 2011.

Table 3. CA-7 Backfill Activities Summary

Date	Loads	Quantity (tons)
4/07/11	26	500.08
4/14/11	43	860.87
4/15/11	42	816.41
4/19/11	28	563.43
4/21/11	11	204.55
4/25/11	35	777.17
4/28/11	4	74.47
4/29/11	15	301.06
5/02/11	12	236.37
Total CA-7 backfill		4,334.41 Tons

3.6 Hydroseeding

Following soil preparation, grass seed was initially applied hydraulically at the rates and percentages outlined in the March 2011 Technical Specifications, to match pre-RA conditions within the Rockford Park District property (IDOT Class 1 Lawn Mixture) and Ekberg's property (IDOT Class 4 Native Grass Mixture) on June 17, 2011. All seeded areas were watered and mowed and in generally good condition; however, reseeding was necessary and completed on August 26, 2011 to improve quality of cover. Site photographs taken on October 31, 2011 show the park grass establishing good, healthy growth and the final inspection on November 21, 2011 found the grass partially established. The areas will likely need additional seeding in spring 2012.

3.7 Trees

Replacement trees were planted at the RA Site to replace trees removed during the RA. Soil preparation and tree selection, transport, handling, installation, and protection were completed in accordance with the design. The hybrid poplar trees were planted in October 2011 and installed with stakes, wrapping and guying for protection and stability. During the final inspection on November 21, 2011, it was noted that all the guy wire supports for the trees had been cut. These guys were subsequently repaired. In addition, the trees were planted while dormant and will require monitoring over the next year.

Section 4

Chronology of Events

This section presents a tabular summary that lists the major events for the Southeast Rockford Groundwater Contamination Superfund Site Source Area 7 project and associated dates of these events beginning with the ROD signature. This summary table also provides estimated dates for subsequent RA activities related to the limited soil excavation RA activities.

Date	Event
June 2002	EPA Record of Decision for OU3
August 2004	Phase I Pre-Design Sampling Activities
June 2005	Phase II Pre-Design Sampling Activities
May – June 2007	Pilot Test and Pump Test
May 2010	Explanation of Significant Difference
August 2010	Work plan development and negotiation
October 2010	RA Contract Award
March 2011	Final remedial design submitted
December 2010	Haul Road Construction Begins
April 2011	RA mobilization and Site preparation
November 21, 2011	Pre-final and final inspection
November 21, 2011	Remedy declared O&F

Section 5

Performance Standards and Construction Quality Control

This section describes the overall performance of the limited soil excavation in terms of performance based construction completion and quality assurance and quality control (QA/QC) procedures followed.

Generally, performance standards are utilized to compare completed RA activities to RGs and effluent discharge limits. However, this RA was performance-based and designed to remove the only the highest contaminated, fine grained materials within an identified hot spot source area without engaging in significant dewatering efforts or specialized shoring to maintain a deeper excavation. The technical specifications were based on a delineation subsurface investigation and pilot test results.

No SAP or QAPP were produced for this RA. As discussed in Section 3.3.2, soil sample results collected during the RA are considered screening level quality and the data is useable only for that purpose. No QC samples were collected and the analytical data did not go through a data validation process.

During the Area 7 limited soil excavation RA construction, no field audits were performed, however the Illinois EPA Project Manager, Doyle Wilson did conduct several site visits to monitor the RA progress and compliance with the specifications.

Section 6

Final Inspections and Certifications

This section presents a summary of the results of the Southeast Rockford Groundwater Contamination Superfund Site Source Area 7 RA contract inspections, health and safety concerns during RA construction, and remedy O&F determination.

6.1 Remedial Action Contract Inspections

6.1.1 Field Audit

Formal audits were not conducted during the Area 7 RA excavation and construction. The Illinois EPA Project Manager, Doyle Wilson conducted several site visits to monitor compliance with the RA plans and specifications. In general, construction deficiencies that were identified were discussed with the Illinois EPA Project Manager and CDM Smith and resolved as described in Section 9.

6.1.2 Pre-Final Inspection

The pre-final inspection was conducted on November 21, 2011 and the checklist is included in **Appendix I**. Representatives from Illinois EPA, CDM Smith, and Bodine were present. Punch list items identified cut guy wires on the replacement trees, partially established grass areas, future monitoring of trees planted while dormant, and a rut that may need filling in the future. Because the punch list items were all minor and did not impact site completion, the inspection was considered to be the final inspection and the remedy was declared O&F on November 21, 2011.

6.2 Health and Safety

The primary health and safety concerns at the Site were contaminant exposure, motorized traffic, and general Site concerns (slips, trips, and falls; safe use of equipment). No accidents or events relating to health and safety occurred during the RA.

6.3 Institutional Controls

ICs will be implemented to address groundwater contamination at the site in the future concurrent with the groundwater/leachate RA, per the ROD. The primary IC for the entire SERGC is through ordinances enacted by the City of Rockford and Winnebago County restricting the installation of private water supply wells. Previously, Illinois EPA notified appropriate property owners regarding the presence of the groundwater contamination as a condition of the OU1 and OU2 RODs. The Illinois EPA and USEPA continue to coordinate additional institutional control activities. For this limited soil excavation RA, no additional ICs are warranted.

6.4 Remedy Operational and Functional Determination

The National Contingency Plan (NCP), Title 40 Code of Federal Regulations Section 300 (40 CFR§300.435[f][2]), states, "A remedy becomes 'operational and functional' either one year after construction is complete, or when the remedy is determined concurrently by the regulatory agencies [i.e., Illinois EPA and U.S. EPA] to be functioning properly and is performing as designed, whichever is earlier." During the O&F period, minor adjustments may be made to the remedy as it undergoes testing and shakedown.

For the Area 7 hot spot soil removal RA, Illinois EPA and U.S. EPA agreed that the remedy was officially O&F on November 21, 2011 after the final inspection had been completed the same day.

Section 7

Long-Term Monitoring Activities

This section generally summarizes the general activities for post-construction operation and maintenance (O&M) such as ongoing monitoring activities. However, for this RA completion, where contaminated soils serving as source material were excavated and removed from the site, no additional monitoring activities are warranted. The RAs selected in the ROD will address remaining soil and groundwater contamination.

Section 8

Summary of Project Costs

Consistent with U.S. EPA guidance (U.S. EPA 2000), a summary of project costs is provided within this RA Report. According to the guidance, the total project costs are to be compared to the estimates presented within the ROD, or in this case the ESD, adjusted to the same dollar year basis as the actual project costs based on the ENR (Engineering News-Record) Construction Cost Index for Chicago (ENR 2011). This comparison is shown in the table below.

The large variance between the cost estimate in the ESD and the final construction cost results from no material removed from excavation being classified as hazardous, whereas the ESD assumed that approximately 67 percent of the soil and all the water removed from the excavation would be classified as hazardous.

Description	Value
ESD Cost Estimate	\$1,100,00
Final Construction Cost	\$455,923
Variance of Work Order	29.90%

The above-referenced U.S. EPA guidance also requires a comparison of ongoing O&M costs that will be incurred. However, O&M will not be required under this RA.

Section 9

Observations and Lessons Learned

This section provides observations and lessons learned from implementation of the Source Area 7 RA construction activities including problems encountered, and resolution if applicable. Overall, the RA was conducted without incident. The routine nature of the work encountered only minor schedule delays due to inclement weather.

Section 10

Area 7 RA Contact Information

A summary of the key Area 7 RA project personnel contacts is presented below.

Name	Title	Organization	Contact Information
Doyle Wilson	Remedial Project Manager	Illinois EPA	Bureau of Land 1021 N. Grand Ave East Springfield, Illinois 62794 (217) 782-7592 Doyle.Wilson@illinois.gov
Michelle Tebrugge	Community Involvement Coordinator	Illinois EPA	1021 N. Grand Ave East Springfield, Illinois 62794 (217) 524-4825 Michelle.Tebrugged@Illinois.gov
Tim Drexler	Project Manager	U.S. EPA Region V	77 W. Jackson Blvd. Chicago, IL 60604-3590 (312) 353-4367 Drexler.timothy@epa.gov
Mike Joyce	Community Involvement Coordinator	U.S. EPA Region V	77 W. Jackson Blvd. Chicago, IL 60604-3590 (312) 353-5546 joyce.mike@epa.gov
John Grabs	Senior Project Manager	CDM Smith	125 S. Wacker Drive Suite 600 Chicago, Illinois (312) 346-5000 grabsc@cdmsmith.com
Troy McFate	Senior Project Manager	Bodine	5350 East Firehouse Rd. Decatur, Illinois 62521 (217) 519-3955 tmcfate@bodineservices.com

Section 11

References

- CDM 1995. *Southeast Rockford Final Remedial Investigation Report*. January.
- CDM 2011. *Source Area 7 Limited Soil Excavation Specifications and Design Drawings*. February.
- ENR 2011. *Construction Cost Index – Chicago*. McGraw-Hill Companies. On-Line Service Accessed on January 25.
- Illinois Environmental Protection Agency 2010. *Explanation of Significant Differences, Southeast Rockford Groundwater Contamination Site, Rockford, Illinois, Source Area 7 Hot Spot Removal*, May 3.
- United States Environmental Protection Agency (U.S. EPA) 2002. *EPA Superfund Record of Decision: Southeast Rockford Ground Water Contamination. EPA ID: ILD981000417. OU 03. Rockford, IL*. June 11.
- U.S. EPA 2000. *Close Out Procedures for National Priorities List Sites*. EPA/540/R-98/016. OSWER Directive 9320.2-09A-P. January.
- U.S. EPA 1998. *Guide to Documenting and Managing Cost and Performance Information for Remediation Projects*. October.
- U.S. EPA 1995. *EPA Superfund Record of Decision: Southeast Rockford Ground Water Contamination. EPA ID: ILD981000417. OU 02. Rockford, IL*. September 29.

Appendix A

Planned Excavation Footprint

Appendix B

Summary of Waste Disposal Information



STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

P.O. BOX 19276

SPRINGFIELD, ILLINOIS 62794-9276 (217) 782-8761

State Form LPC 62 8/81 IL532-0610

FOR SHIPMENT OF ~~HAZARDOUS~~
AND SPECIAL WASTE

PLEASE TYPE

(Form designed for use on elite (12 pitch) typewriter.)

EPA Form 8700-22 (Rev. 6-89)

Form Approved. OMB No. 2050-0039

UNIFORM WASTE MANIFEST		1. Generator's US EPA ID No. 9810000417		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law, but is required by Illinois law.			
3. Generator's Name and Mailing Address South East Rockland Superfund Rockland IL 61109						A. Illinois Manifest Document Number IL 10189989 FEE PAID IF APPLICABLE					
4. *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* 800-885-4840						B. Generator's IL ID Number					
5. Transporter 1 Company Name Trans Environmental LTD						C. Transporter's ID Number 4780					
6. US EPA ID Number						D. Transporter's Phone 815 885-4840					
7. Transporter 2 Company Name						E. Transporter's ID Number					
8. US EPA ID Number						F. Transporter's Phone ()					
9. Designated Facility Name and Site Address Veolia ES Orchard Hills Land Fill, INC 8290 Hwy 251 DAVIS Junction, IL 61020						G. Facility's IL ID Number 14101751005					
10. US EPA ID Number						H. Facility's Phone 815 874-9000					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No.		13. Total Quantity		14. Unit Wt/Vol	
a. Non-hazardous, non regulated soil by DOT 0.01 DT										Waste No.	
b.										EPA HW Number	
c.										EPA HW Number	
d.										EPA HW Number	
J. Additional Description for Materials Listed Above DHL 00942 - Soil cuttings						K. Handling Codes for Wastes Listed Above In Item #14 D - Drums					
15. Special Handling Instructions and Additional Information											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name Rebecca Hong						Signature <i>[Signature]</i>			Date 03/25/11		
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>[Signature]</i>			Date 03/25/11		
Printed/Typed Name STEVE SANDERS						Signature <i>[Signature]</i>			Date 03/25/11		
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature			Date		
Printed/Typed Name						Signature			Date		
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name ON						Signature <i>[Signature]</i>			Date 03/25/11		

This Agency is authorized to require, pursuant to Illinois Revised Statute, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide this information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

COPY 1. TSD MAIL TO GENERATOR

TRAN 203

In case of a spill call the Illinois Office of Emergency Response at 217 / 782-7860 and the National Response Center at 800 / 424-8802 or 202 / 426-2675.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number				
					004987295 JJK				
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)							
Illinois EPA 2615 11 th Street, Rockford, IL 61109 815-782-7592									
Generator's Phone:									
6. Transporter 1 Company Name		U.S. EPA ID Number							
7. Transporter 2 Company Name		U.S. EPA ID Number							
8. Designated Facility Name and Site Address		U.S. EPA ID Number							
Veeva ES Orchard Ridge Landfill, 8298 Hwy 251, Davis Junction, IL 61029 815-874-9800		1410175003							
Facility's Phone:									
9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
			No.	Type					
	1. C-301 w/ VOI's 878670			DT	15	Y			
	2. 878718								
	3.								
4.									
14. Special Handling Instructions and Additional Information									
Profile #0E100942-808 TRUCK # LICENSE PLATE #									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name		Signature		Month		Day		Year	
Donald Hall Agent for EPA		Donald B. Hall		05		03		11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
17. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name		Signature		Month		Day		Year	
DRM, Avelin		[Signature]		2				11	
Transporter 2 Printed/Typed Name		Signature		Month		Day		Year	
18. Discrepancy:									
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number:									
18b. Alternate Facility (or Generator) U.S. EPA ID Number									
Facility's Phone:									
18c. Signature of Alternate Facility (or Generator) Month Day Year									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1.		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name		Signature		Month		Day		Year	
MIA		[Signature]		05		03		11	

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987343 JJK	
5. Generator's Name and Mailing Address Missouri EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name RA Sexton 2335 Newburg Road, Schiller, IL (815) 376-9759		U.S. EPA ID Number 49-54				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address Veeva ES Orchard Hills Landfill, 3200 Hwy 251, Davis Junction, IL 61020 815-674-9860		U.S. EPA ID Number 141017-0005				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 8784002	✓ 1	DT	115	YD	
2.	8784173					
3.	8785555					
4.	878636					
14. Special Handling Instructions and Additional Information Profile NOEL00947-508 TRUCK # _____ LICENSE PLATE # _____						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name BRETT BAKER AS AGENT FOR EPA		Signature Baker		Month Day Year 05 03 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name VINNIE BURN		Signature Vinn		Month Day Year 05 03 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year 05 03 11		

Form Approved. OMB No. 2050-0039

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>2011310074</u>		2. Page 1 of <u>1</u>		3. Emergency Response Phone		4. Manifest Tracking Number 004987342 JJK			
		5. Generator's Name and Mailing Address <u>Illinois EPA 2613 11th Street, Rockford, IL 61109 217-782-7592</u>									
Generator's Site Address (if different than mailing address)											
Generator's Phone:											
6. Transporter 1 Company Name <u>LA Senter 2435 Newburg Road, Oak Ridge, IL (615) 278-9739</u>								U.S. EPA ID Number <u>9954</u>			
7. Transporter 2 Company Name								U.S. EPA ID Number			
8. Designated Facility Name and Site Address <u>Yoclin E3 Oakland Hills Landfill 6250 Hwy 251, Davis Junction, IL 61020 815-874-9400</u>								U.S. EPA ID Number <u>1416175065</u>			
Facility's Phone:											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
	1.	<u>C-Soil w/ VOC's 878409</u>				<u>X1</u>	<u>D1</u>	<u>8X15</u>	<u>Y1</u>		
	2.	<u>878476</u>									
	3.	<u>878601</u>									
	4.	<u>878647</u>									
14. Special Handling Instructions and Additional Information <u>Profile #OHL00942-008 TRUCK # 234 LICENSE PLATE#</u>											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name <u>BELT MCKE AS AGENT FOR IEPA</u>								Signature <u>[Signature]</u>			
								Month Day Year <u>05 03 11</u>			
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials										
TRANSPORTER	Transporter 1 Printed/Typed Name <u>WILL C FIGUEROA</u>								Signature <u>[Signature]</u>		
									Month Day Year <u>05 03 11</u>		
Transporter 2 Printed/Typed Name								Signature			
								Month Day Year			
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator)								U.S. EPA ID Number		
	Facility's Phone:										
18c. Signature of Alternate Facility (or Generator)								Month Day Year			
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.		2.		3.		4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name <u>[Signature]</u>								Signature <u>[Signature]</u>			
								Month Day Year <u>05 03 11</u>			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987341 JJK		
5. Generator's Name and Mailing Address HENK: EPA 2515 11th Street, Richton, IL 61109 217-762-7592			Generator's Site Address (if different than mailing address)				
Generator's Phone:							
6. Transporter 1 Company Name RA Saxon 2355 Northway Road, DeKalb, IL		(815) 578-9799		U.S. EPA ID Number 4954			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veolia ES Orchard Hills Landfill, 5292 Hwy 251, Davis Junction, IL 61029 815-874-9900			U.S. EPA ID Number 1410175005				
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
	1.	C-Soil w/ VOC's 878411	11	DT	115	YD	
	2.	818480					
	3.	878561					
	4.	878637					
14. Special Handling Instructions and Additional Information Profile #OHL0042-003 TRUCK # _____ LICENSE PLATE# _____							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name BEET BACH		Signature <i>[Signature]</i>		Month Day Year 05 03 11			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name JAMES BACH		Signature <i>[Signature]</i>		Month Day Year ____			
Transporter 2 Printed/Typed Name		Signature		Month Day Year			
TRANSPORTER	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number			
	Facility's Phone:						
DESIGNATED FACILITY	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____						
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1.	2.	3.	4.			
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
	Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year 05 03 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 201000074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987348 JJK	
5. Generator's Name and Mailing Address Hess EPA 2613 11 th Street, Rockford, IL 61109 217-752-7592		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name A. Sutton 2835 Newburg Road, Belvidere, IL 61005 815-376-9788		U.S. EPA ID Number 954				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address Veeva ES Orchard Hills Landfill, 6200 Hwy 251, Davis Junction, IL 61920 815-874-9009		U.S. EPA ID Number 110175085				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 877003	001	DT	15	Y	
2.	877043					
3.	877093					
4.	8777341					
14. Special Handling Instructions and Additional Information Profile #08100942-003 TRUCK # LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name Rick EVERETT (BODINE/HARRIS JR. TRUCK)		Signature Richard B. Everett		Month Day Year 10/28/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Dan		Signature		Month Day Year		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: U.S. EPA ID Number						
18b. Alternate Facility (or Generator)						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 201030074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987349 JJK			
		5. Generator's Name and Mailing Address NE/Gen EPA 2615 11th Street, Rockford, IL 61109 217-782-7592								Generator's Site Address (if different than mailing address)	
Generator's Phone:		6. Transporter 1 Company Name RA Senter 2355 Northway Road, Rockford, IL (815) 376-9789				U.S. EPA ID Number 4954					
		7. Transporter 2 Company Name				U.S. EPA ID Number					
		8. Designated Facility Name and Site Address Vesta 45 Orchard Road, Rockford, IL 61109 815-574-9000				U.S. EPA ID Number 1410175285					
Facility's Phone:											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	1.	C-Soil w/ VOC's 8778003				001 DT		15	Y		
	2.	8770601									
	3.	877316									
	4.	8777357									
14. Special Handling Instructions and Additional Information Profile #0HLO942-003 TRUCK # 331 LICENSE PLATE#											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Officer's Printed/Typed Name Rick Every (Signature) AGENT EPA								Signature <i>[Signature]</i>		Month Day Year 04 28 11	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
	Transporter signature (for exports only): _____										
DESIGNATED FACILITY	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name JOHN C FIGUEROA Signature <i>[Signature]</i> Month Day Year 4 28 11 Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____										
	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____ Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____										
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. _____ 2. _____ 3. _____ 4. _____										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name _____ Signature <i>[Signature]</i> Month Day Year 04 28 11											

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987347 JJK		
5. Generator's Name and Mailing Address IMMISIRPA 2613 11th Street, Rockford, IL 61109 817-762-7592				Generator's Site Address (if different than mailing address)			
Generator's Phone:							
6. Transporter 1 Company Name W.A. Foster 2335 Newburg Road, Bolingbrook, IL (815) 578-5799				U.S. EPA ID Number 4054			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veolia US Orchard Hills Landfill, 6280 Hwy 251, Davis Junction, IL 61020 815-674-9000				U.S. EPA ID Number 1410175805			
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
1.	C-Soil w/ VOC's 877372	001	DT	15	Y		
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information Profile #001.00042.008 TRUCK # 344 LICENSE PLATE# 7785							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Rick Every (Boline) Algonquin, IL				Signature <i>[Signature]</i>		Month Day Year 04/28/11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Van Anderson				Signature <i>[Signature]</i>		Month Day Year 4/28/11	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a							
Printed/Typed Name AK				Signature <i>[Signature]</i>		Month Day Year 4/28/11	

Form Approved. OMB No. 2050-0039

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY-TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's ID Number 2010300074		Page 1 of 2		3. Emergency Response Phone No.		Manifest/Tracking Number 004987291 JJK		
5. Generator's Name and Mailing Address EPA 2613 11th Street, Rockford, IL 61109						Generator's Site Address (if different than mailing address) 217-782-7592				
Generator's Phone: 815-874-9006										
6. Transporter 1 Company Name RA 55420 2355 Newburg Road, Belvidere, IL						U.S. EPA ID Number 4954				
7. Transporter 2 Company Name						U.S. EPA ID Number				
8. Designated Facility Name and Site Address VEOLIA ES ORCHARD HILLS LANDFILL, 8290 Hwy 251, DAVIS JUNCTION IL 61026						U.S. EPA ID Number 1410175005				
Facility's Phone: 815-874-9006										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
	1.	C-Soil w/Vocs 876680				001	DT	15	Y	
	2.	876724								
	3.									
	4.									
14. Special Handling Instructions and Additional Information										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 282.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name Rick Every (Signature) ASGMA Fr. Insp.										
Signature [Signature]										
Month Day Year 09 06 11										
TRANSPORTER INTL	16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	Transporter signature (for exports only): _____									
	17. Transporter Acknowledgment of Receipt of Materials: EPA 2613 11th Street, Rockford, IL 61109 217-782-7592									
TRANSPORTER	Transporter 1 Printed/Typed Name VINNIE P									
	Signature [Signature]									
	Month Day Year 4 26 11									
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name VEOLIA ES ORCHARD HILLS LANDFILL, 8290 Hwy 251, DAVIS JUNCTION, IL 61026									
	Signature [Signature]									
	Month Day Year 09 06 11									
18. Discrepancy										
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
Veolia ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61026 815-874-9006 1410175005										
18b. Alternate Facility (or Generator) U.S. EPA ID Number										
Facility's Phone:										
18c. Signature of Alternate Facility (or Generator) Profile #01100942-06 TRUCK # LICENSE PLATE #										
Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. 2. 3. 4.										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a										
Printed/Typed Name [Signature]										
Signature [Signature]										
Month Day Year 04 26 11										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2410300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987290 JJK	
5. Generator's Name and Mailing Address ILLINOIS EPA 2613 11th STREET, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:			U.S. EPA ID Number			
6. Transporter 1 Company Name KA SEARON 2355 NEWARK ROAD, BLOOMING, IL 815-378-9799			U.S. EPA ID Number 4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address VEOLIA ES DECISION HAZUS LANDFILL 8290 HWY 251, DAVIS JUNCTION, IL 61020 815-874-9000			U.S. EPA ID Number 1410175005			
Facility's Phone:			U.S. EPA ID Number			
9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-SEAL W/VOCS 876674	001	DT	15	Y	
2.	876713					
3.						
4.						
14. Special Handling Instructions and Additional Information # 9670 L # 35465 IL						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name LICK FIVEY (BUTNA) HENRICH, IL EPA		Signature [Signature]		Month Day Year 04/26/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
Transporter signature (for exports only):						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name ROBERT BAKER		Signature [Signature]		Month Day Year 4/26/11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987280 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-782-7332		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name RA Seaton 2835 Newbury Road, Bensenville, IL		(615) 376-9739			U.S. EPA ID Number 4854	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address Veolia ES Orchard Hills Landfill, 8250 Hwy 251, Davis Junction, IL 61020 815-874-9608					U.S. EPA ID Number 1418175805	
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 876672	001	DT	15	Y	
2.	876711					
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #OHL00942-603 TRUCK # LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Rick Ever (HASTING) AGENT LA TEAM		Signature [Signature]		Month Day Year 04 26 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Signature: Month Day Year: 04 26 11 Transporter 2 Printed/Typed Name: Signature: Month Day Year:						
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: Signature: Month Day Year: 04 26 11						

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 3010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987274 JJK		
5. Generator's Name and Mailing Address Illinois EPA 2615 11 th Street, Rockford, IL 61109 247-762-7592			Generator's Site Address (if different than mailing address)				
Generator's Phone:							
6. Transporter 1 Company Name RA Gordon 2355 Newburg Road, Oakridge, IL (815) 374-9799			U.S. EPA ID Number 4934				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address Vondra ES Orchard Rd. Leland, IL 61020 815-674-9000			U.S. EPA ID Number 1416175005				
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	1. C-Sub w/ VOC's 876670	001	DT	15			
	2. 876709						
	3.						
	4.						
14. Special Handling Instructions and Additional Information Profile #OHL00942-008 TRUCK # 357 LICENSE PLATE# 3714							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Richard J. Liberman		Signature [Signature]		Month 09	Day 26	Year 11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Dan Kalina		Signature [Signature]		Month 09	Day 26	Year 11	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: U.S. EPA ID Number							
18b. Alternate Facility (or Generator)							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)					Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name [Signature]		Signature [Signature]		Month 09	Day 26	Year 11	

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number		
		2010300074			004987277 JJK		
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)					
Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-782-7392							
Generator's Phone:							
6. Transporter 1 Company Name		U.S. EPA ID Number					
EA Sonten 2355 Newburg Road, Boliviana, IL (315) 878-9799		4934					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address		U.S. EPA ID Number					
Veeva ES Orchard 5111 Road 400, 8290 Hwy 251, Dora Junction, IL 61026 815-674-9000		1410173003					
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes	
		No.	Type				
1.	C-Soil w/ VOC's 876612	001	DT	15	Y		
2.	876604						
3.	876606						
4.	876646						
14. Special Handling Instructions and Additional Information							
Profile #00100942-005 TRUCK #606 LICENSE PLATE #PSS1159							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name		Signature		Month		Day	Year
Rich Ever (Bodine) Agent for EPA		[Signature]		04		26	11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name		Signature		Month		Day	Year
Cambaia		[Signature]		04		26	11
Transporter 2 Printed/Typed Name		Signature		Month		Day	Year
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. 2. 3. 4.							
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 18a							
Printed/Typed Name		Signature		Month		Day	Year
[Signature]		[Signature]		04		26	11

DESIGNATED FACILITY TO GENERATOR

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY		TRANSPORTER		INTL		GENERATOR	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name: _____ Signature: _____ Date: _____		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. _____ 2. _____ 3. _____ 4. _____		18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ U.S. EPA ID Number: _____		17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: _____ Signature: _____ Date: _____ Transporter 2 Printed/Typed Name: _____ Signature: _____ Date: _____	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (I am a large quantity generator) or (b) (I am a small quantity generator) is true.		14. Special Handling Instructions and Additional Information Evite #CHL00942-508 TRUCK # 357 LICENSE PLATE # 3714		13. Waste Codes 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____ 9. _____ 10. _____ 11. _____ 12. _____ 13. _____ 14. _____ 15. _____ 16. _____ 17. _____ 18. _____ 19. _____ 20. _____	
9a. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) 870494 C-SM/TX/VOCS 870540 870579 8706031		10. Containers No. _____ Type _____ 11. Total _____ 12. Unit _____ 13. Waste Codes _____		8. Designated Facility Name and Site Address Facility's Phone: _____ U.S. EPA ID Number: _____		7. Transporter 2 Company Name U.S. EPA ID Number: _____	
6. Transporter 1 Company Name U.S. EPA ID Number: _____		5. Generator's Name and Mailing Address Generator's Site Address (if different than mailing address): _____ Generator's Phone: _____		4. Manifest Tracking Number 004987275 JJK		3. Emergency Response Phone 2. Page 1 of _____	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010800074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987276 JJK	
		5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-782-7592							
Generator's Site Address (if different than mailing address)								Generator's Phone:	
6. Transporter 1 Company Name RA Sutton 2336 Newburg Road, Oakridge, IL		(815) 376-5769		U.S. EPA ID Number 1934					
7. Transporter 2 Company Name				U.S. EPA ID Number					
8. Designated Facility Name and Site Address Vesler 23 Orchard Hill Landfill, 8290 Hwy 251, Davis Junction, IL 61029 815-874-9000				U.S. EPA ID Number 1410175003					
Facility's Phone:									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit W/Vol.	13. Waste Codes
	1.	C-Soil w/ VOC's 876495			001 DT 15		Y		
	2.	876550							
	3.	876586							
	4.	8766035							
14. Special Handling Instructions and Additional Information Profile #OHL00942-008 TRUCK # _____ LICENSE PLATE# _____									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name L. J. EVERETT (Signature) Agent for TEM					Signature [Signature]		Month Day Year 5/ 26 11		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name JORDAN AUKEN					Signature [Signature]		Month Day Year 5/ 26 11	
	Transporter 2 Printed/Typed Name					Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number			
	Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)									Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1.		2.		3.		4.			
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name [Signature]					Signature [Signature]		Month Day Year 5/ 26 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987278 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-762-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name E.A. Sutton 2355 Newburg Road, Schiller Park, IL (615) 373-9799			U.S. EPA ID Number 4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veslin E.S. Orchard 5111 Landfill, 5290 Hwy 251, Davis Junction, IL 61020 815-674-5000			U.S. EPA ID Number 1410175005			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 876507	001	DT	15	Y	
2.	876557					
3.	876591					
4.	876630					
14. Special Handling Instructions and Additional Information Profile #00HL009-02-608 TRUCK # 9670 LICENSE PLATE # 35 465 IL						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name K. J. Evers (Binding) Agent for IEPA		Signature [Signature]		Month Day Year 04 26 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature Month Day Year ROBERT BAKER [Signature] 4 26 11 Transporter 2 Printed/Typed Name Signature Month Day Year						
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name Signature Month Day Year						

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010206074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987279 JJK		
		5. Generator's Name and Mailing Address Union EPA 2613 11th Street, Rockford, IL 61109 217-762-7592								
Generator's Phone:		Generator's Site Address (if different than mailing address)								
6. Transporter 1 Company Name RA Smith 2355 Newburg Road, Bolingbrook, IL		(615) 378-8799		U.S. EPA ID Number 4954						
7. Transporter 2 Company Name				U.S. EPA ID Number						
8. Designated Facility Name and Site Address Veolia ES Orchard Hills Landfill, 6799 Hwy 251, Davis Junction, IL 61020 815-874-0000				U.S. EPA ID Number 1410175005						
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes	
	1.	C-Soil w/ VOC's 876505			001 DT		15	Y		
	2.	876559								
	3.	876599								
	4.	876639								
14. Special Handling Instructions and Additional Information Profile #OHL00942-008 TRUCK # LICENSE PLATE #										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name Rich Evers (Bodine) NGRM for EPA Signature Richard Evers Month 09 Day 26 Year 11										
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Vinnie B Signature Vinnie B Month 4 Day 26 Year 11									
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection									
	18b. Alternate Facility (or Generator) Manifest Reference Number:									
	Facility's Phone:									
	18c. Signature of Alternate Facility (or Generator)									
19. Hazardous Waste Report Management Method Codes (i.e., codes for h- 1. 2.										
20. Designated Facility Owner or Operator Printed/Typed Name										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987272 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name R.A. Seaton 2355 Newburg Road, Belvidere, IL (615) 878-9709			U.S. EPA ID Number 4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veeva ES Orchard Hills Road 611, 0290 Hwy 251, Davis Junction, IL 61620 815-674-9800			U.S. EPA ID Number 141017305			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 875071	201	DT	15	1/2	
2.	875300					
3.	875391					
4.	875451					
14. Special Handling Instructions and Additional Information Profile #0HL0042-008 TRUCK # LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name B. J. Acker		Signature B. J. Acker		Month Day Year 09 01 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name B. J. Acker		Signature B. J. Acker		Month Day Year 09 01 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>W00000074</u>	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987273 JJK	
5. Generator's Name and Mailing Address <u>Illinois EPA 2613 11th Street, Rockford, IL 61109 717-782-7592</u>			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name <u>RA Sexton 2355 Newburg Road, Melville, IL</u>			U.S. EPA ID Number <u>4934</u>			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address <u>Yokka ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61020 815-874-5000</u>			U.S. EPA ID Number <u>1418173065</u>			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	<u>C-Soil w/ VOC's 8750108</u>	<u>001</u>	<u>PT</u>	<u>15</u>	<u>10</u>	
2.	<u>8753000</u>					
3.	<u>875385</u>					
4.	<u>875446</u>					
14. Special Handling Instructions and Additional Information <u>Profile #OHL00942-608 TRUCK # 331 LICENSE PLATE# 30214</u>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name <u>Dave D. Davis</u>		Signature <u>[Signature]</u>		Month <u>1</u>	Day <u>21</u>	Year <u>11</u>
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <u>JOHN C FIDJERO JR</u>		Signature <u>[Signature]</u>		Month <u>4</u>	Day <u>21</u>	Year <u>11</u>
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number:						
18b. Alternate Facility (or Generator)			U.S. EPA ID Number			
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)			Month Day Year			
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator (Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a) Printed/Typed Name <u>[Signature]</u> Signature <u>[Signature]</u> Month <u>04</u> Day <u>21</u> Year <u>11</u>						

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>22476500774</u>	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987271 JJK		
5. Generator's Name and Mailing Address <u>Illinois EPA 3615 11th Street, Rockford, IL 61107 815-782-7592</u>							
Generator's Phone: _____							
6. Transporter 1 Company Name <u>USA Western 2553 Northrup Road, Mayfield, IL (815) 578-5794</u>							
U.S. EPA ID Number <u>954</u>							
7. Transporter 2 Company Name _____							
U.S. EPA ID Number _____							
8. Designated Facility Name and Site Address <u>Veolia ES Orchard Hills Landfill, 3220 Hwy 251, Davis Junction, IL 61020 615-574-9600</u>							
U.S. EPA ID Number <u>1419175905</u>							
Facility's Phone: _____							
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	
	1.	<u>C-Soil w/ VOC's</u>	<u>001</u>	<u>07</u>	<u>15</u>	<u>YD</u>	
	2.	<u>875315</u>					
	3.	<u>875375</u>					
	4.	<u>825437</u>					
13. Waste Codes							
14. Special Handling Instructions and Additional Information <u>Profile #OHL00942-005 TRUCK # 357 LICENSE PLATE # 3714</u>							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name <u>Brian D. BACIK</u>							
Signature <u>Brian D. BACIK</u>							
Month Day Year <u>07 01 11</u>							
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____						
	Transporter signature (for exports only): _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name <u>Don Kahan</u>						
	Signature <u>Don Kahan</u>						
	Month Day Year <u>09 21 11</u>						
Transporter 2 Printed/Typed Name _____							
Signature _____							
Month Day Year _____							
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____						
	Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator) _____							
Month Day Year _____							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <u>KAI</u>							
Signature <u>KAI</u>							
Month Day Year <u>07 01 11</u>							

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>200000001</u>	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987270 JJK	
5. Generator's Name and Mailing Address <u>Union EPA 2613 11th Street, Rockford, IL 61109</u> Generator's Site Address (if different than mailing address)						
Generator's Phone: _____						
6. Transporter 1 Company Name <u>Union EPA 2613 11th Street, Rockford, IL 61109</u>					U.S. EPA ID Number	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address <u>Valley P. Orchard Hills Landfill, 8200 Hwy 251, Davis Junction, IL 61020</u>					U.S. EPA ID Number <u>1314175005</u>	
Facility's Phone: _____						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
		No.	Type			
1.	C-Soil w/ VOC's <u>875657</u>	001	DT	15	YD	
2.	<u>875311</u>					
3.	<u>8755371</u>					
4.	<u>875428</u>					
14. Special Handling Instructions and Additional Information <u>Profile #DHL00942-018 TRUCK # 9726 LICENSE PLATE#</u>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name <u>BRETT BROWN</u>		Signature <u>[Signature]</u>			Month Day Year <u>07 21 11</u>	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name <u>[Signature]</u>		Signature <u>[Signature]</u>			Month Day Year <u>07 21 11</u>	
Transporter 2 Printed/Typed Name		Signature			Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: _____						
18b. Alternate Facility (or Generator)					U.S. EPA ID Number	
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)					Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name <u>[Signature]</u>		Signature <u>[Signature]</u>			Month Day Year <u>07 21 11</u>	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010370074			004987269 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Illinois EPA, 2613 11 th Street, Rockford, IL 61109		217-782-7592				
Generator's Phone:						
6. Transporter 1 Company Name		2355 Nowling Road, Belvidere, IL		(815) 376-9799	U.S. EPA ID Number	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address		Vocals ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020		515-874-9000	U.S. EPA ID Number	
Facility's Phone:					1410175005	
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	C-Soil w VOC's 875049	001	D1	15	40	
2.	875503					
3.	875357					
4.	875410					
14. Special Handling Instructions and Additional Information						
Profile #0410042-005 TRUCK # 9799 LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name		Signature		Month Day Year		
BRETT BAKER AGENT FOR IEPD		[Signature]		07 01 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
MICHAEL LANGSTON		[Signature]		11 31 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator. Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		
		[Signature]		11 31 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010300074			004987268 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Illinois EPA 2615 11 th Street, Rockford, IL 61109 217-782-7592						
Generator's Phone:						
6. Transporter 1 Company Name		24. Sender 2335 Hawthorn Road, Schiller, IL		(815) 576-9799		U.S. EPA ID Number
7. Transporter 2 Company Name						U.S. EPA ID Number
8. Designated Facility Name and Site Address		Veeha ES Orchard Hills Landfill, 6290 Hwy 231, Davis Junction, IL 61920 815-674-9000				U.S. EPA ID Number
Facility's Phone:		1410175005				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	C-Soil w/ VOC's 875239	001	BT	15	MB	
2.	875300					
3.	875350					
4.	875409					
14. Special Handling Instructions and Additional Information						
Profile #OHL00942-008 TRUCK # 980 LICENSE PLATE# P 683663						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name		Signature			Month	Day
Brett Baker Agent for ILPA		[Signature]			09	27
16. International Shipments		<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.		
Transporter signature (for exports only):		Port of entry/exit				
		Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature			Month	Day
RA Sutton B Myers		[Signature]				
Transporter 2 Printed/Typed Name		Signature			Month	Day
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator)						
U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						
Month						
Day						
Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature			Month	Day
					09	27

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010304074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987266 JJK	
5. Generator's Name and Mailing Address Illinois EPA 7613 11th Street, Rockford, IL 61109 815-782-7500		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name RA Barton 2355 Newburg Road, Rockford, IL		(815) 378-9799			U.S. EPA ID Number 3954	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address Vocals 23 Richard Hill, Lisle, IL 60120 615-374-9039					U.S. EPA ID Number 1418173005	
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 875057	001	DI	15	10	
2.	875109					
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #00HL00942-005 TRUCK # 350 LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name BETH BAUER		Signature B. Bauer		Month Day Year 04/20/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature Month Day Year		Transporter 2 Printed/Typed Name Signature Month Day Year				
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year						

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987267 JJK		
		5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-782-7392								
Generator's Site Address (if different than mailing address)										
Generator's Phone:		6. Transporter 1 Company Name RA Sotom 2355 Newburg Road, Bole, Mo, IL (615) 572-9793				U.S. EPA ID Number 4954				
		7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address Veeva ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 615-674-9000		U.S. EPA ID Number 1430173015								
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1.	C-Soil w/ VOC's 875055				001 DT		15	10	
	2.	875105								
	3.									
	4.									
14. Special Handling Instructions and Additional Information Profile #00100942-008 TRUCK # LICENSE PLATE										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offeror's Printed/Typed Name Brett Baker About 1000					Signature <i>[Signature]</i>		Month Day Year 04 20 11			
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
	Transporter signature (for exports only):									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name Michael Larson				Signature <i>[Signature]</i>		Month Day Year 4 20 11			
	Transporter 2 Printed/Typed Name				Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number:									
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number					
	Facility's Phone:									
	18c. Signature of Alternate Facility (or Generator)							Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1.		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name CA				Signature <i>[Signature]</i>		Month Day Year 04 20 11				

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2030300074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987264 JJK			
		5. Generator's Name and Mailing Address Minerals EPA 2513 11th Street, Rockford, IL 61109 217-762-7592								Generator's Site Address (if different than mailing address)	
Generator's Phone:		6. Transporter 1 Company Name RA Sutton 7355 Newburg Road, Delvidere, IL (615) 873-9799						U.S. EPA ID Number 4954			
		7. Transporter 2 Company Name						U.S. EPA ID Number			
		8. Designated Facility Name and Site Address Vesta ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61029 815-874-9830						U.S. EPA ID Number 1-10173005			
Facility's Phone:											
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes					
		No.	Type								
1.	C-Soil w/ VOC's 875045	001	US	15	10						
2.	875096										
3.											
4.											
14. Special Handling Instructions and Additional Information Profile #00HL00942-678 TRUCK # 980 LICENSE PLATE# PC83CC3											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name BLAIR BAKER				Signature <i>[Signature]</i>		Month Day Year 07 20 11					
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____											
17. Transporter Acknowledgment of Receipt of Materials											
Transporter 1 Printed/Typed Name RA Sutton				Signature <i>[Signature]</i>		Month Day Year 07 20 11					
Transporter 2 Printed/Typed Name				Signature		Month Day Year					
18. Discrepancy											
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
Manifest Reference Number: _____											
18b. Alternate Facility (or Generator) U.S. EPA ID Number											
Facility's Phone: _____											
18c. Signature of Alternate Facility (or Generator) Month Day Year											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.		2.		3.		4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a											
Printed/Typed Name RA Sutton				Signature <i>[Signature]</i>		Month Day Year 07 20 11					

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987261 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-782-7597			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name R.A. Sutton 2355 Northburg Road, Rockford, IL (815) 376-9799			U.S. EPA ID Number 4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veolia ES Orchard Hills Landfill, 8290 Hwy 251, Paris, Jackson, IL 61020 615-674-9000			U.S. EPA ID Number 1410175085			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 8748103	001	Dr	15	10	
2.	874911					
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #OHL0042-008 TRUCK # LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name B. D. Bader		Signature [Signature]		Month 07	Day 20	Year 11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Brian Corvosa		Signature [Signature]		Month 4	Day 20	Year 11
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name [Signature]		Signature [Signature]		Month Day Year 07 20 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987262 JJK	
5. Generator's Name and Mailing Address Illinois EPA 3612 11th Street, Rockford, IL 61169 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name RA. Saxon 2355 Newburg Road, Schiller, IL		(815) 376-9799		U.S. EPA ID Number 4954		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address Verlin F. Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61029 815-874-9888				U.S. EPA ID Number 1419175065		
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 874812	001 DT		15	YD	
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #00100942-60N TRUCK # 951 LICENSE PLATE# 35 743T2						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name BRUCE BOHLEN		Signature <i>Bruce Bohlen</i>		Month Day Year 07 10 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
Transporter signature (for exports only):						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name TOM HARRIS		Signature <i>Tom Harris</i>		Month Day Year 4 20 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator)		U.S. EPA ID Number				
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)		Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year 04 20 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 701000074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987265 JJK	
5. Generator's Name and Mailing Address Missouri EPA 2613 11th Street, Rockford, IL 61109 217-782-7592		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name RA Seaton 2355 Newburg Road, Bolingbrook, IL (815) 374-0789		U.S. EPA ID Number 4934				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address Vesta ES Orchard Hills Landfill, 6290 Hwy 251, Down Junction, IL 61020 815-874-9000		U.S. EPA ID Number 1410173095				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
1.	C-Soil w/ VOC's	875103	001 PI	15	10	
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #OHL00942-003 TRUCK # LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offoror's Printed/Typed Name Brett Barker		Signature [Signature]		Month 09	Day 20	Year 11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month	Day	Year
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature		Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 201C300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987260 JJK
5. Generator's Name and Mailing Address Union EPA 2513 11th Street, Rockford, IL 61103 217-752-7392			Generator's Site Address (if different than mailing address)		
Generator's Phone:					
6. Transporter 1 Company Name RA Santa 2655 Newburg Road, Melville, IL			(815) 375-9799		U.S. EPA ID Number 4954
7. Transporter 2 Company Name					U.S. EPA ID Number
8. Designated Facility Name and Site Address Veeha ES Orchard Hills, 6290 Hwy 251, Down Junction, IL 61620 815-874-9800					U.S. EPA ID Number 1410175035
Facility's Phone:					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.
1.	C-Soil w/ VOC's 874816	001	D1	15	~10
2.	874898				
3.	874951				
4.	8775007				
14. Special Handling Instructions and Additional Information Profile #CMTL00942-608 TRUCK # 999 LICENSE PLATE#					
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Offor's Printed/Typed Name DEMIT BAKER			Signature AGENT FOR U.S.		Month Day Year 05 10 11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:					
17. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name Mr. Michael LAASE			Signature [Signature]		Month Day Year 11 30 11
Transporter 2 Printed/Typed Name			Signature		Month Day Year
18. Discrepancy					
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
Manifest Reference Number:					
18b. Alternate Facility (or Generator) U.S. EPA ID Number					
Facility's Phone:					
18c. Signature of Alternate Facility (or Generator) Month Day Year					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
1.	2.	3.	4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a					
Printed/Typed Name			Signature		Month Day Year 04 20 11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>Illinois EPA 2613 11th Street, Springfield, IL 61102</u>		2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987255 JJK			
		5. Generator's Name and Mailing Address <u>517 762-7592</u>							
Generator's Phone:		6. Transporter 1 Company Name <u>RA Station 1355 Newburg Road, Belvidere, IL</u>		<u>(615) 378-9799</u>		U.S. EPA ID Number <u>0954</u>			
7. Transporter 2 Company Name						U.S. EPA ID Number			
8. Designated Facility Name and Site Address <u>Vocals ER Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61020</u>						U.S. EPA ID Number <u>1410175005</u>			
Facility's Phone:									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
	1.	<u>C-Soil w/ VOC's 874839</u>			<u>001 DT</u>		<u>15</u>	<u>YD</u>	
	2.	<u>874888</u>							
	3.	<u>874938</u>							
	4.	<u>874994</u>							
14. Special Handling Instructions and Additional Information <u>PEOPLE YELLOW 42-008</u> <u>TRUCK # 980</u> <u>LICENSE PLATE PC83663</u>									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offeror's Printed/Typed Name <u>RA Station</u>					Signature <u>[Signature]</u>		Month Day Year <u>01 05 11</u>		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name <u>RAS B Myers</u>					Signature <u>[Signature]</u>		Month Day Year <u>04 20 11</u>	
Transporter 2 Printed/Typed Name					Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number: _____								
	Facility's Phone: _____								
	18c. Signature of Alternate Facility (or Generator)							Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. _____ 2. _____ 3. _____ 4. _____									
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name <u>[Signature]</u>					Signature <u>[Signature]</u>		Month Day Year <u>04 20 11</u>		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010000074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987263 JJK	
5. Generator's Name and Mailing Address Birkhoff 3613 11 th Street, Rockford, IL 61109 219-762-7592						
Generator's Site Address (if different than mailing address)						
Generator's Phone:						
6. Transporter 1 Company Name RA Sexton 3253 Newburg Road, Belvidere, IL (815) 376-9799			U.S. EPA ID Number 4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veolia ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 815-874-9000			U.S. EPA ID Number 1410175005			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
1.	C-Soil w/ VOC's 874858	001	DT	15	10	
2.	874908					
3.	874957					
4.	875014					
14. Special Handling Instructions and Additional Information Profile #OHL0042-008 TRUCK # 350 LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. (If export shipment and I am the Primary Exporter, certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name Birkhoff		Signature [Signature]		Month Day Year 04/10/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Ben Sexton		Signature [Signature]		Month Day Year 4/30/11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner/Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name [Signature]		Signature [Signature]		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300076		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987259 JJK		
		5. Generator's Name and Mailing Address Hirsch EPA 2013 1st Street, Rockford, IL 61109 217-762-7592								
Generator's Phone:		6. Transporter 1 Company Name RA Eaton 3355 Newburg Road, Bolingbrook, IL (615) 378-9799				U.S. EPA ID Number 4854				
		7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address Vocals P.O. Orchard Hills Landfill, 6700 Hwy 251, Davis Junction, IL 61020 (615) 874-9000		U.S. EPA ID Number 1419175915								
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1.	C-Soil w/ VOC's 814887				001 D		15	10	
	2.	814945								
	3.	875003								
	4.	875051								
14. Special Handling Instructions and Additional Information Profile #0941-004 TRUCK # 257 LICENSE PLATE# 3714										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name Brian Brown					Signature <i>[Signature]</i>			Month Day Year 09 20 11		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name Dan Kullman					Signature <i>[Signature]</i>			Month Day Year 04/20/11	
	Transporter 2 Printed/Typed Name					Signature			Month Day Year	
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number:									
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number				
	Facility's Phone:									
18c. Signature of Alternate Facility (or Generator)								Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1.			2.			3.			4.	
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name <i>[Signature]</i>					Signature <i>[Signature]</i>			Month Day Year 04 20 11		

KAI 357

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 20103400074	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number 004987282 JJK	
5. Generator's Name and Mailing Address Illinois EPA 3613 11th Street, Rockford, IL 61109 815-782-7592						
Generator's Phone:						
6. Transporter 1 Company Name A. Jensen 2550 Newburg Road, Melrose, IL 61151 815-576-9729				U.S. EPA ID Number 953		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address Veolia ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61020 815-874-9000				U.S. EPA ID Number 1410173005		
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Sol w VOC's	001	DT	15	Y	
2.	874214					
3.	8742106					
4.	874306					
14. Special Handling Instructions and Additional Information Profile #OHL00942-008 TRUCK #9611 LICENSE PLATE #7545620						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name TRU MCFATE AGENT FOR TPCA				Signature <i>[Signature]</i>		Month Day Year 09/18/11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name CARY APPELHANS				Signature <i>[Signature]</i>		Month Day Year 09/18/11
Transporter 2 Printed/Typed Name				Signature		Month Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator)				U.S. EPA ID Number		
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name OA				Signature <i>[Signature]</i>		Month Day Year 09/18/11

APP 9611

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number		
		0010300074		004987283 JJK			
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)					
Hibiscus EPA 2515 11 th Street, Rockford, IL 61109		217-782-7592					
6. Transporter 1 Company Name		U.S. EPA ID Number					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address		U.S. EPA ID Number					
Facility's Phone:		1410275005					
9a. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
1. 874213		001	DT	15	Y		
2. C-SH/W VOC's							
3. 874257							
4. 874305							
14. Special Handling Instructions and Additional Information							
Profile #OHL0042-009 TRUCK #606 LICENSE PLATE #P551159							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name		Signature		Month Day Year			
TROY MCFATE AGENT FOR JCPA		[Signature]		10/18/11			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Part of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name		Signature		Month Day Year			
GARY VIA		[Signature]		10/18/11			
Transporter 2 Printed/Typed Name		Signature		Month Day Year			
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month Day Year			
[Signature]		[Signature]		10/18/11			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number 004987257 JJK		
5. Generator's Name and Mailing Address Illinois EPA 2615 11 th Street, Rockford, IL 61109 217-782-7592				Generator's Site Address (if different than mailing address)			
Generator's Phone:							
6. Transporter 1 Company Name HA Service 2355 Newburg Road, Rockford, IL (815) 398-9799				U.S. EPA ID Number 4054			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address Vocals ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 815-674-3000				U.S. EPA ID Number 1410175005			
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes	
1.	C-Soil w/ VOC's 874205	001	DT	15	Y		
2.	874246						
3.	874295						
4.							
14. Special Handling Instructions and Additional Information Profile #OHL009-12-608 TRUCK # LICENSE PLATE #							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Troy McNamee AGENT FOR IEPA				Signature Troy McNamee	Month 04	Day 18	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.				Port of entry/exit: Date leaving U.S.:			
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name JORDAN JUNE 22 Signature Month 4 Day 18 Year 2011							
Transporter 2 Printed/Typed Name Signature Month Day Year							
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name Signature Month Day Year							

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074		2. Page 1 of 1		3. Emergency Response Phone		4. Manifest Tracking Number 004987258 JJK			
		5. Generator's Name and Mailing Address Mine's EPA 2513 11th Street, Rockford, IL 61109 217-782-7500		Generator's Site Address (if different than mailing address)							
Generator's Phone:		6. Transporter 1 Company Name RA Sutton 2155 Newburg Road, Bolingbrook, IL (815) 375-9799				U.S. EPA ID Number 4954					
		7. Transporter 2 Company Name				U.S. EPA ID Number					
8. Designated Facility Name and Site Address Veeba EE Orchard Hills Landfill, 5790 Hwy 251, Davis Junction, IL 61020 815-874-9900		U.S. EPA ID Number 1419273825									
Facility's Phone:											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes	
	1.	C-Soil w/ VOC's				874197 001 D7		15	Y		
	2.	874243									
	3.	874290									
	4.										
14. Special Handling Instructions and Additional Information Profile #OHL00942-608 TRUCK # _____ LICENSE PLATE # _____											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name TROY McFARLANE AGENT FOR JTA					Signature <i>[Signature]</i>		Month Day Year 04 18 11				
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials										
TRANSPORTER	Transporter 1 Printed/Typed Name Brian Cerasa					Signature <i>[Signature]</i>		Month Day Year 4 18 11			
	Transporter 2 Printed/Typed Name					Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number										
	Facility's Phone: _____										
18c. Signature of Alternate Facility (or Generator) Month Day Year											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.		2.		3.		4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name					Signature		Month Day Year				

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010300074	1		004987284 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Hessco EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592						
Generator's Phone:						
6. Transporter 1 Company Name		U.S. EPA ID Number				
RA Station 2355 Newburg Road, Bolviders, IL (815) 374-9799		4954				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
Veeva F&S Orchard Hill Landfill, 8296 Hwy 7 251, Davis Junction, IL 61020 815-874-9083		2410175005				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
		No.	Type			
1.	C-Soil w/ VOC's 874190	001	DT	15	Y	
2.	874236					
3.	874283					
4.						
14. Special Handling Instructions and Additional Information						
Profile #OHL00942-604 TRUCK # 35 ? LICENSE PLATE# 3714						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name		Signature		Month Day Year		
Troy McFate AGENT FOR EPA		[Signature]		04/18/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
Dan Ba Ling		[Signature]		04/18/11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature		Month Day Year		
[Signature]		[Signature]		04/18/11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
				1		004987256 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61070 (If different than mailing address)							
Generator's Phone: (815) 398-0700							
6. Transporter 1 Company Name W. H. Heston 2255 North State Street, Rockford, IL 61070						U.S. EPA ID Number	
7. Transporter 2 Company Name						U.S. EPA ID Number	
8. Designated Facility Name and Site Address Vollia ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 815-874-9800						U.S. EPA ID Number 1410175005	
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity
					No.	Type	12. Unit Wt./Vol.
	1.	C-Soil w/ VOC's			001	DT	15
	2.	874184					Y
	3.	874233					
4.	874279						
14. Special Handling Instructions and Additional Information							
Profile #ORL0042-608 TRUCK # 334 LICENSE PLATE# 30214							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Troy McFate						Signature [Signature]	
						Month 04 Day 13 Year 11	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
	Transporter signature (for exports only):						
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Juan C Figueroa						Signature [Signature]
	Transporter 2 Printed/Typed Name						Signature [Signature]
							Month 04 Day 18 Year 11
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator)						Month 04 Day 18 Year 11
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name [Signature]						Signature [Signature]	
						Month 04 Day 18 Year 11	

Red 334

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 201030074	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number 004987281 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name A. Sesto 2355 Newburg Road, Oakridge, IL		(615) 375-9799		U.S. EPA ID Number 4054		
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address Veeva 23 Orchard Road, Dundas, ONT, Canada 251, Dixie Junction, IL 61020 815-874-9803		U.S. EPA ID Number 1410175005				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 874177	001	DT	15	Y	
2.	874225					
3.	874271					
4.						
14. Special Handling Instructions and Additional Information Profile #01100342-018 TRUCK # LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name TRACY W. FINE		Signature [Signature]		Month Day Year 04/18/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Moises Rosas		Signature [Signature]		Month Day Year 04/18/11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name [Signature]		Signature [Signature]		Month Day Year 04/18/11		

XXXXXX

XXXXXXXX

Illinois PPA 2613 11th Street, Rockford, IL 61109 217-782-7992

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987254 JJK		
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)					
Generator's Phone:							
6. Transporter 1 Company Name		U.S. EPA ID Number					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address		U.S. EPA ID Number					
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
1.	C-Soil w/ VOCs 873093	001	DT	15	Y		
2.	873153						
3.							
4.							
14. Special Handling Instructions and Additional Information Profile #0H100942-608 TRUCK # LICENSE PLATE #							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name		Signature			Month	Day Year	
Richard E. King (Algonquin TSP) Butom		[Signature]			04	14/11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name		Signature			Month	Day Year	
Transporter 2 Printed/Typed Name		Signature			Month	Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. 2. 3. 4.							
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a							
Printed/Typed Name		Signature			Month	Day Year	
[Signature]		[Signature]			04	14/11	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010000074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987251 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2013 11th Street, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:			U.S. EPA ID Number			
6. Transporter 1 Company Name RA Saxon 2355 Newburg Road, Bolivare, IL (615) 876-9799			4054			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veolia ES Orchard Hills Landfill, 6220 Hwy 251, Davis Junction, IL 61020 815-674-6000			1410175005			
Facility's Phone:			U.S. EPA ID Number			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 873087	001	ST	15	Y	
2.	873147					
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #OHL00942-608 TRUCK # 347 LICENSE PLATE# P685972						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Rick Every (AGENT FOR IEPA) Bolivar		Signature <i>Michael G. Every</i>		Month Day Year 04/14/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name ABC 9 INC		Signature <i>John Be</i>		Month Day Year 04/14/11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: U.S. EPA ID Number						
18b. Alternate Facility (or Generator)						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						
Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year 04/14/11		

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987248 JJK
5. Generator's Name and Mailing Address XXXXXX			Generator's Site Address (if different than mailing address) XXXXXX		
Generator's Phone:			U.S. EPA ID Number		
6. Transporter 1 Company Name			U.S. EPA ID Number		
7. Transporter 2 Company Name			U.S. EPA ID Number		
8. Designated Facility Name and Address XXXXXX			U.S. EPA ID Number XXXXXX		
Facility's Phone:					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt/Vol
1.	C-Soil w/ VOCs 873088	001	DT	15	Y
2.	873144				
3.					
4.					
14. Special Handling Instructions and Additional Information Profile #OHL0942-008 TRUCK # 9611 LICENSE PLATE # P545620					
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable International and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Officer's Printed/Typed Name Rick Every (Agent for JJK) & Co.			Signature <i>[Signature]</i>		Month Day Year 04/14/11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/ext: Date leaving U.S.:					
17. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name GARY APPELHANS			Signature <i>[Signature]</i>		Month Day Year 04/14/11
Transporter 2 Printed/Typed Name			Signature		Month Day Year
18. Discrepancy					
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
Manifest Reference Number:					
18b. Alternate Facility (or Generator) U.S. EPA ID Number					
Facility's Phone:					
18c. Signature of Alternate Facility (or Generator)					Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
1.	2.	3.	4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a					
Printed/Typed Name APP 9611			Signature <i>[Signature]</i>		Month Day Year 04/14/11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987249 JJK	
5. Generator's Name and Mailing Address Union EPA 2613 11th Street, Rockford, IL 61109 217-762-7592				Generator's Site Address (if different than mailing address)			
Generator's Phone:							
6. Transporter 1 Company Name RA Seaton 1255 Newburg Road, Schiller, IL				U.S. EPA ID Number 4954			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veeva ES Orchard Hills Landfill, 5290 Hwy 251, Davis Junction, IL 61020 815-474-3803				U.S. EPA ID Number 1410175065			
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.
	1.	C-Soil w/ VOC's 873076		001 DT		15	Y
	2.	873139					
	3.						
	4.						
14. Special Handling Instructions and Additional Information Profile #OHL0042-003 TRUCK #606 LICENSE PLATE #P551159							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Rick Evely (Agent for Tspco) Boline				Signature <i>[Signature]</i>		Month Day Year 10/14/11	
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Garney Via		Signature <i>[Signature]</i>		Month Day Year 10/14/11		
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	18b. Alternate Facility (or Generator)				Manifest Reference Number: _____ U.S. EPA ID Number _____		
	Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18b							
Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>		Month Day Year 10/14/11	

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987253 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-762-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:			U.S. EPA ID Number			
6. Transporter 1 Company Name RA Sonten 2355 Newburg Road, Babylon, IL (615) 378-9799			4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Verona ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61620 615-874-3000			1410175915			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 873072	001	DT	15	Y	
2.	813123					
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #001100942-605 TRUCK # 334 LICENSE PLATE# 30214						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Rick Evey (Agent for EPA) BCOING		Signature [Signature]		Month Day Year 04/19/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Juan C Figueroa		Signature [Signature]		Month Day Year 4/14/11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature		Month Day Year 4/14/11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987250 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2513 11th Street, Rockford, IL 61109 217-782-7592		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name RA Smith 2355 Newburg Road, Moline, IL (815) 378-9799		U.S. EPA ID Number 4954				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address Veeha US Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61620 615-374-9970		U.S. EPA ID Number 1410175005				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 873000	001	DT	15	Y	
2.	873110					
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #0HLO942-005 TRUCK # 3510 LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name RICHENEY LAUREN FOR T&P/D Bodine		Signature <i>[Signature]</i>		Month Day Year 10/14/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Part of entry/exit Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name JORDAN AUCLER		Signature <i>[Signature]</i>		Month Day Year 10/14/11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year 10/14/11		

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010200074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987252 JJK		
5. Generator's Name and Mailing Address Illinois EPA 2612 11th Street, Rockford, IL 61105 217-793-7592		Generator's Site Address (if different than mailing address)					
Generator's Phone:							
6. Transporter 1 Company Name U.A. Souten 2355 Newburg Road, Rockford, IL (815) 376-9749		U.S. EPA ID Number 4954					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address Verdia ES Orchard Hills Landfill, 290 Hwy 251, Davis Junction, IL 61020 815-374-9000		U.S. EPA ID Number 1410175005					
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
1.	C-Soil w/ VOC's 873057	001	DT	15	Y		
2.	873111						
3.							
4.							
14. Special Handling Instructions and Additional Information Profile #06110942-003 TRUCK # 397 LICENSE PLATE#							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offoror's Printed/Typed Name Rick Fugate (AGEN FOR EPA) Eugene		Signature <i>[Signature]</i>		Month Day Year 04/14/11			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Moises Rosas		Signature <i>[Signature]</i>		Month Day Year 04/14/11			
Transporter 2 Printed/Typed Name		Signature		Month Day Year			
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year 04/14/11			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987247 JJK		
5. Generator's Name and Mailing Address Illinois EPA 2015 11th Street, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)				
Generator's Phone:							
6. Transporter 1 Company Name RA Reaton 2385 Newburg Road, Schiller, IL		(615) 378-9799		U.S. EPA ID Number 4954			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address Vosha E S Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61028 815-874-9009				U.S. EPA ID Number 1410175905			
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
	1.	C-Soil w/ VOC's 873071	001	DT	15	K	
	2.	873106					
	3.						
	4.						
14. Special Handling Instructions and Additional Information Profile #OHL00942-603 TRUCK # 357 LICENSE PLATE# 3714							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(e) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name PICK EVELY (AGEN FOR IEA) POSTAGE		Signature <i>[Signature]</i>		Month Day Year 04 14 11			
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____				
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Dan Halton		Signature <i>[Signature]</i>		Month Day Year 04 14 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	18b. Alternate Facility (or Generator) 2010300074		Manifest Reference Number: U.S. EPA ID Number				
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator) 2015 11th Street, Rockford, IL 61109 217-782-7592		Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. RA Reaton 2385 Newburg Road, Schiller, IL		3. (615) 378-9799		4. 4954			
20. Designated Facility Owner or Operator. Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year 04 14 11			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300974		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987237 JJK		
		5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-762-7592								
Generator's Phone:		6. Transporter 1 Company Name RA. Genco 2355 Newburg Road, Melrose, IL (615) 376-9799						U.S. EPA ID Number 4954		
		7. Transporter 2 Company Name						U.S. EPA ID Number		
8. Designated Facility Name and Site Address:		U.S. EPA ID Number								
		Veolia ES Orchard Hills Landfill, 3290 Hwy 251, Davis Junction, IL 61020 815-874-9000						1410175095		
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
						No.	Type			
	1.	C-Sol w VOC's				001	DT	15	Y	
	2.	872797								
	3.	872843								
	4.	872884								
		872923								
14. Special Handling Instructions and Additional Information Profile #CHL00942-603 TRUCK # 357 LICENSE PLATE# 3914										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name PICK UP AGENT FOR IEPA) bader						Signature <i>[Signature]</i>		Month Day Year 04/13/11		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name Dan Malina						Signature <i>[Signature]</i>		Month Day Year 04/13/11	
	Transporter 2 Printed/Typed Name						Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number: _____									
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number			
	Facility's Phone:									
18c. Signature of Alternate Facility (or Generator)								Month Day Year 04/13/11		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1.			2.			3.			4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name CAI						Signature <i>[Signature]</i>		Month Day Year 04/13/11		

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987246 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-782-7592		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name R.A. Staton 2355 Newburg Road, Belvidere, IL (815) 378-5799		U.S. EPA ID Number 4954				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address Veeha EE Orchard Hills Landfill, 5280 Hwy 251, Davis Junction, IL 61020 815-874-9050		U.S. EPA ID Number 1410175005				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 822835	001	DT	15	Y	
2.	872882					
3.	872918					
4.						
14. Special Handling Instructions and Additional Information Profile #CHL00942-008 TRUCK # LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Kickney (Name for EPA) Dodine		Signature <i>[Signature]</i>		Month Day Year 09/13/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator)		U.S. EPA ID Number				
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)		Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name [Signature]		Signature <i>[Signature]</i>		Month Day Year 09/13/11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987245 JJK		
5. Generator's Name and Mailing Address UNION EPA 2613 11th Street, Rockford, IL 61109 217-762-7592			Generator's Site Address (if different than mailing address)				
Generator's Phone:							
6. Transporter 1 Company Name			U.S. EPA ID Number				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address			U.S. EPA ID Number				
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
	1.	872834 Oil/w/ Waxes	001	DT	15	Y	
	2.	872880					
	3.	872880					
	4.	872917					
14. Special Handling Instructions and Additional Information Profile #OHL00942-003 TRUCK #606 LICENSE PLATE #PSS 1159							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name LICK ERY (AGENT for EPA) Bodine			Signature <i>[Signature]</i>		Month Day Year 04/13/11		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
	Transporter signature (for exports only):						
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Gary U.A		Signature <i>[Signature]</i>		Month Day Year 04/13/11		
	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number						
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator)					Month Day Year	
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1.	2.	3.	4.			
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
	Printed/Typed Name [Signature]		Signature <i>[Signature]</i>		Month Day Year 04/13/11		

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987236 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11 th Street, Rockford, IL 61109 287-782-7592		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name AA Seaton 2355 Newburg Road, Bolingbrook, IL		(815) 776-9709		U.S. EPA ID Number 4953		
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address Voclin ES Orchard Hills Landfill, E150 Hwy 251, Davis Junction, IL 61020 815-874-9000		U.S. EPA ID Number 141017305				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 872672	001	DT	13	Y	
2.	872800					
3.	072902					
4.						
14. Special Handling Instructions and Additional Information Profile #08100942-036 TRUCK # LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name Rick Evers (AGENT FOR EPA) Bolingbrook		Signature Richard S. Evers		Month Day Year 10/13/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials Transporter signature (for exports only): Transporter 1 Printed/Typed Name Heather Samayoa Signature Month Day Year Transporter 2 Printed/Typed Name Signature Month Day Year						
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number 18b. Alternate Facility (or Generator) Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year						

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <i>203, 034, 007, 74</i>	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987233 JJK	
5. Generator's Name and Mailing Address <i>Illinois EPA 2615 11th Street, Rockford, IL 61107-5003</i>						
Generator's Site Address (if different than mailing address)						
Generator's Phone:						
6. Transporter 1 Company Name <i>Rockford Hazardous Waste, Rockford, IL</i>					U.S. EPA ID Number <i>15-515</i>	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address <i>Rockford Hills Landfill, 830 Hwy 251, Davis Junction, IL 61020 815-534-0000</i>					U.S. EPA ID Number <i>140175003</i>	
Facility's Phone:						
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity
				No.	Type	12. Unit Wt./Vol.
	1.	<i>C-Soil w/ VOC's</i>		<i>872830</i>	<i>001 DT</i>	<i>15 Y</i>
	2.			<i>872878</i>		
	3.			<i>872913</i>		
4.						
13. Waste Codes						
14. Special Handling Instructions and Additional Information <i>Profile #OPL00942-600 TRUCK # 334 LICENSE PLATE# 30214</i>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name <i>Rick Eyal (Agent for EPA) B. Line</i>						
Signature <i>Richard Eyal</i>						
Month Day Year <i>04 13 11</i>						
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:					
	Transporter signature (for exports only):					
DESIGNATED FACILITY	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name <i>SARA C Silverwood</i>					
Transporter 2 Printed/Typed Name						
Signature <i>[Signature]</i>						
Month Day Year <i>4 13 11</i>						
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						
Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name <i>[Signature]</i>						
Signature <i>[Signature]</i>						
Month Day Year <i>4 13 11</i>						

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 7010300074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987234 JJK		
		5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-782-7392		Generator's Site Address (if different than mailing address)						
Generator's Phone:		6. Transporter 1 Company Name RA Sexton 2355 Newburg Road, Newburg, IL (815) 578-9799		U.S. EPA ID Number 4954						
		7. Transporter 2 Company Name		U.S. EPA ID Number						
8. Designated Facility Name and Site Address Vestlin ES Orchard Hills Road 50, 8290 Hwy 251, Davis Junction, IL 61920 815-874-9000				U.S. EPA ID Number 1419172085						
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes	
	1.	C-Soil w/ VOC's			872826 001 DT		15	K		
	2.	872872								
	3.	872903								
	4.									
14. Special Handling Instructions and Additional Information Profile #OHL00942-008 TRUCK # LICENSE PLATE#										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name Rick Evey (AGENT FOR EPA) Bodine										
Signature Rick Evey										
Month Day Year 04/13/11										
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name: Rosas Signature: Month Day Year									
	Transporter 2 Printed/Typed Name: Signature: Month Day Year									
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number:									
	18b. Alternate Facility (or Generator) U.S. EPA ID Number									
	Facility's Phone:									
18c. Signature of Alternate Facility (or Generator) Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. 2. 3. 4.										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name: ROS 387 Signature: Month Day Year 04/13/11										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number			
		2010200074			004987235 JJK			
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)						
Generator's Phone:		Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592						
6. Transporter 1 Company Name					U.S. EPA ID Number			
7. Transporter 2 Company Name		R.A. Seaborn 2255 Newburg Road, Rockford, IL (815) 376-9799			U.S. EPA ID Number 2954			
8. Designated Facility Name and Site Address					U.S. EPA ID Number			
Facility's Phone:		Veeva ES Orchard Hills Landfill, 5250 Hwy 751, Dowle Junction, IL 61020 815-374-9000			1418175095			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit. WL/Vol.	13. Waste Codes	
			No.	Type				
	1. 872813		001	DT	15	K		
	2. 872856							
	3. 872890							
4.								
14. Special Handling Instructions and Additional Information								
Profile #00HL00942-608 TRUCK # 9164 LICENSE PLATE #								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name		Signature		Month		Day		Year
Rick Evey (Agent for EPA) Bodine		[Signature]		04		13		11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name		Signature		Month		Day		Year
Transporter 2 Printed/Typed Name		Signature		Month		Day		Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1.		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 48a								
Printed/Typed Name		Signature		Month		Day		Year
JNA		[Signature]		04		13		11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>ADJ03000174</u>		2. Page 1 of <u>1</u>		3. Emergency Response Phone		4. Manifest Tracking Number 004987238 JJK		
		5. Generator's Name and Mailing Address <u>Vincennes EPA 2513 11th Street, Rockford, IL 61109 217-782-7392</u>								
Generator's Phone:		Generator's Site Address (if different than mailing address)								
6. Transporter 1 Company Name		<u>2355 Newburg Road, Rockford, IL</u>				<u>(815) 375-9799</u>		U.S. EPA ID Number <u>953</u>		
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address		<u>Vincennes 2355 Newburg Road, Rockford, IL 61109 217-782-7392</u>				<u>815-374-3500</u>		U.S. EPA ID Number <u>1410175005</u>		
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
						No.	Type			
	1.	<u>C-Soil w/ VOC 870634</u>				<u>601</u>	<u>DT</u>	<u>15</u>	<u>K</u>	
	2.	<u>870603</u>								
	3.	<u>870739</u>								
	4.	<u>872742</u>								
14. Special Handling Instructions and Additional Information <u>Profile #0010042-008 TRUCK # 961 LICENSE PLATE #</u>										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name <u>PICK EYER (AGENT FOR TEPA) B. Lipe</u>					Signature <u>Richard S. Lipe</u>		Month Day Year <u>04/13/11</u>			
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name <u>[Signature]</u>					Signature		Month Day Year <u>04/13/11</u>		
TRANSPORTER	Transporter 2 Printed/Typed Name					Signature		Month Day Year <u>04/13/11</u>		
	18. Discrepancy									
	18a. Discrepancy Indication Space: <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
DESIGNATED FACILITY	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number: _____									
	Facility's Phone: _____									
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____									
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
	1.	2.	3.	4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 18a										
Printed/Typed Name <u>[Signature]</u>					Signature <u>[Signature]</u>		Month Day Year <u>04/13/11</u>			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987239 JJK	
5. Generator's Name and Mailing Address Union EPA 2513 11th Street, Rockford, IL 61101-2197						
Generator's Site Address (if different than mailing address)						
Generator's Phone:						
6. Transporter 1 Company Name		RA Sexton 2355 Newburg Road, Belvidere, IL (815) 378-9799			U.S. EPA ID Number 4954	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address		Veeba ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61020 815-874-9890			U.S. EPA ID Number 1410173025	
Facility's Phone:						
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.
	1.	C-Soil w/ VOC's 870631	001	DT	15	YB
	2.	870678				
	3.	810735				
	4.	822787				
13. Waste Codes						
14. Special Handling Instructions and Additional Information Profile #00HL0042-008 TRUCK # 6006 LICENSE PLATE# P551159						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name		Signature			Month Day Year	
Rick Evey (AGENT FOR IEPA) BODINE		Richard B Evey			04 13 11	
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:					
	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name		Signature		Month Day Year	
	Cary Vei		Cary Vei		04 13 11	
	Transporter 2 Printed/Typed Name		Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number:					
	18b. Alternate Facility (or Generator)		U.S. EPA ID Number			
	Facility's Phone:					
18c. Signature of Alternate Facility (or Generator)		Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a		Signature		Month Day Year		
Printed/Typed Name				04 13 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>2010300074</u>		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987240 JJK		
		5. Generator's Name and Mailing Address <u>Illinois EPA 2613 11th Street, Rockford, IL 61109 217-762-7592</u>								
Generator's Phone:		Generator's Site Address (if different than mailing address)								
6. Transporter 1 Company Name		<u>RA Gordon 2355 Newburg Road, Bolingbrook, IL (815) 375-9799</u>				U.S. EPA ID Number <u>6154</u>				
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address		<u>Veolia ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61920 815-374-8000</u>				U.S. EPA ID Number <u>1410175895</u>				
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1.	<u>C-Soil w/ VOC's 872629</u>				<u>001 DT</u>		<u>15</u>	<u>Y</u>	
	2.	<u>872673</u>								
	3.	<u>872704</u>								
	4.	<u>872784</u>								
14. Special Handling Instructions and Additional Information <u>Profile #OHL0047-608 TRUCK # 334 LICENSE PLATE# 30214</u>										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name <u>Pick Every (Agent For EPA) Bodine</u>					Signature <u>[Signature]</u>		Month Day Year <u>10/13/11</u>			
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name <u>JOHN C FIDGON</u>					Signature <u>[Signature]</u>		Month Day Year <u>10/13/11</u>		
Transporter 2 Printed/Typed Name					Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number:									
	18b. Alternate Facility (or Generator) U.S. EPA ID Number									
	Facility's Phone:									
18c. Signature of Alternate Facility (or Generator)							Month Day Year			
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1.		2.		3.		4.				
20. Designated Facility Owner or Operator. Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a										
Printed/Typed Name <u>[Signature]</u>					Signature <u>[Signature]</u>		Month Day Year <u>10/13/11</u>			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010000074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987241 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name P.A. Carter 2555 Highway Road, Bolingbrook, IL			(615) 375-9799		U.S. EPA ID Number 1410175034	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address Verde ES Orchard Hills Landfill, 3200 Hwy 251, Paris, Jackson, IL 61420 615-574-9000					U.S. EPA ID Number 1410175035	
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 272108B	001	DT	15	Y	
2.	872677					
3.	862760					
4.	872776					
14. Special Handling Instructions and Additional Information Profile #00100942-003 TRUCK # 397 LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Rick Every (Agent for IEPA) Bolingbrook			Signature <i>[Signature]</i>		Month Day Year 04 13 11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Miss K... Signature _____ Month Day Year Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year						
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name _____ Signature _____ Month Day Year 04 13 11						

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 20103000774	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987242 JJK			
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61105 267-762-7392						Generator's Site Address (if different than mailing address)		
Generator's Phone:								
6. Transporter 1 Company Name A Sexton 2555 Peterson Road, Oak Ridge, IL 61537 278-9799						U.S. EPA ID Number 053		
7. Transporter 2 Company Name						U.S. EPA ID Number		
8. Designated Facility Name and Site Address Veslin ES Orchard Hills Landfill, 8290 Hwy 751, Davis Junction, IL 61020 815-874-5000						U.S. EPA ID Number 1410173005		
Facility's Phone:								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
1.	C-Soil w/ VOC's 870615			001 DT	15	Y		
2.	870658							
3.	870702							
4.	870759							
14. Special Handling Instructions and Additional Information Profile #01H00042-603 TRUCK # 964 LICENSE PLATE 30 224 V								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name Link Evers (Agent for J.E.D.)				Signature <i>[Signature]</i>		Month Day Year 04 15 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>		Month Day Year ____		
Transporter 2 Printed/Typed Name				Signature		Month Day Year ____		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1.			2.			3.		
4.								
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a								
Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>		Month Day Year 04 15 11		

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		201000074			004987244 JJK	
5. Generator's Name and Mailing Address: Elmox EPA 2013 11th Street, Rockford, IL 61109 815-375-9792						
Generator's Site Address (if different than mailing address):						
Generator's Phone: RA Bortis 2055 Highway Road, Selviden IL 61333 815-375-9792						
6. Transporter 1 Company Name					U.S. EPA ID Number	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address: Elmox EPA 2013 11th Street, Rockford, IL 61109 815-375-9792					U.S. EPA ID Number: 10475005	
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) VOC's	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1	872103	001	DT	15	Y	
2	872100					
3	872105					
4	872150					
14. Special Handling Instructions and Additional Information: Profile #0010042-008 TRUCK # 357 LICENSE PLATE 3774						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name: Richard B. Eagle					Signature: Richard B. Eagle	Month Day Year: 04 13 11
16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name					Signature	Month Day Year
Transporter 2 Printed/Typed Name					Signature	Month Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
20. Designated Facility Owner or Operator (Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a)						
Printed/Typed Name					Signature	Month Day Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		004987243			JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592						
Generator's Phone:						
6. Transporter 1 Company Name		U.S. EPA ID Number				
RA Seaton 2655 Newbury Road, Belvidere, IL (815) 378-2799		4954				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
Voclin ES Orchard Hills Landfill, 5290 Hwy 251, Davis Junction, IL 61020 815-374-9900		1410175005				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	C-Soil w/ VOC 872602	001	PT	15	Y	
2.	872661					
3.	810710					
4.	872772					
14. Special Handling Instructions and Additional Information						
Profile #CHL00942-008 TRUCK # 9108 LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 282.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name		Signature			Month	Day Year
Richard B. Every Jr. / AGENT for EPA) Buline		[Signature]			04	13 11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature			Month	Day Year
Heidi Samayoa		[Signature]				
Transporter 2 Printed/Typed Name		Signature			Month	Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						
Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature			Month	Day Year
[Signature]		[Signature]			04	13 11

UNIFORM HAZARDOUS WASTE MANIFESTATION		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987231 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2513 11 th Street, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name RA. Section 2355 Newburg Road, Melville, IL (815) 378-9799			U.S. EPA ID Number 4934			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Verona ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 815-574-0000			U.S. EPA ID Number 1410175005			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 872392					
2.	872450					
3.	872502					
4.						
14. Special Handling Instructions and Additional Information Profile #OHL00942-608 TRUCK # 9611 LICENSE PLATE # P545620						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name Rick Every (Bulinc) Agent for Team		Signature [Signature]		Month Day Year 04 12 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name GARY APPELHANS		Signature [Signature]		Month Day Year 04 12 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 7010300074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987229 JJK					
		5. Generator's Name and Mailing Address Illinois EPA 2615 11th Street, Rockford, IL 61109 217-762-7592											
Generator's Phone:		Generator's Site Address (if different than mailing address)											
6. Transporter 1 Company Name RA Sexton 2335 Newburg Road, Babbler, IL		(815) 378-9790				U.S. EPA ID Number 4954							
7. Transporter 2 Company Name		U.S. EPA ID Number											
8. Designated Facility Name and Site Address Verba E3 Orchard Hills Landfill, 3290 Hwy 251, Davis Junction, IL 61020 815-874-9300		U.S. EPA ID Number 1419175005											
Facility's Phone:													
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
						No.	Type						
	1.	C-Soil w/ VOC's 870350											
	2.	870435											
	3.	870488											
14. Special Handling Instructions and Additional Information Freight #01100942-002 TRUCK #344 LICENSE PLATE# 370 6													
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
Generator's/Officer's Printed/Typed Name Rick Evered (BUTNER) AGENT/EXPORTER					Signature <i>[Signature]</i>					Month 04	Day 12	Year 11	
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:												
	Transporter signature (for exports only):												
	17. Transporter Acknowledgment of Receipt of Materials												
DESIGNATED FACILITY	Transporter 1 Printed/Typed Name Dan Anderson					Signature <i>[Signature]</i>					Month 4	Day 12	Year 11
	Transporter 2 Printed/Typed Name					Signature					Month	Day	Year
	18. Discrepancy												
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection													
Manifest Reference Number:													
18b. Alternate Facility (or Generator)					U.S. EPA ID Number								
Facility's Phone:													
18c. Signature of Alternate Facility (or Generator)													
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)													
1. 2. 3. 4.													
20. Designated Facility Owner, or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a													
Printed/Typed Name <i>[Signature]</i>					Signature <i>[Signature]</i>					Month 04	Day 12	Year 11	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987230 JJK	
5. Generator's Name and Mailing Address Union EPA 2613 11th Street, Rockford, IL 61109 815-767-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name R.A. Sexton 2255 Newburg Road, Bolingbrook, IL 60440 (815) 375-9799			U.S. EPA ID Number 4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veeva EE Orchard Hills Landfill, 6190 Hwy 751, Davis Junction, IL 61620 815-474-0000			U.S. EPA ID Number 1410173085			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 870389					
2.	870443					
3.	870497					
4.						
14. Special Handling Instructions and Additional Information Profile #OHL0042-003 TRUCK # 334 LICENSE PLATE# 30714						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name Rick Evers (Booth) Administrator		Signature <i>[Signature]</i>		Month Day Year 04/12/11		
16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Juan C Figueroa		Signature <i>[Signature]</i>		Month Day Year 4/12/11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year 04/12/11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987228 JJK		
		5. Generator's Name and Mailing Address Illinois EPA 2513 11th Street, Rockford, IL 61102-1234 Generator's Site Address (if different than mailing address)								
Generator's Phone: RA Seaton 2355 Newberry Road, Rockford, IL (815) 398-9799		4974								
6. Transporter 1 Company Name								U.S. EPA ID Number		
7. Transporter 2 Company Name								U.S. EPA ID Number		
8. Designated Facility Name and Site Address Rockford Hills Landfill, 8298 Hwy 251, Davis Junction, IL 61029 815-874-9090								U.S. EPA ID Number 610175005		
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
						No.	Type			
	1.	C-Shell w/ VOC's								
	2.	870308								
	3.	870407								
	4.	870479								
14. Special Handling Instructions and Additional Information TRUCK # _____ LICENSE PLATE # _____										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name R. A. Seaton (Rockford) Administrator, IEPA Signature [Signature] Month 04 Day 12 Year 11										
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
TRANSPORTER	Transporter 1 Printed/Typed Name Luis M. Ambriz				Signature [Signature]				Month 4 Day 12 Year 11	
	Transporter 2 Printed/Typed Name				Signature				Month Day Year	
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number									
	Facility's Phone:									
	18c. Signature of Alternate Facility (or Generator)								Month Day Year	
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
	1.	2.	3.	4.						
	20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a									
	Printed/Typed Name [Signature]				Signature [Signature]				Month 04 Day 10 Year 11	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987227 JJK	
		5. Generator's Name and Mailing Address Union EPA 7513 11th Street, Rockford, IL 61109 217-702-7592							
Generator's Phone:		Generator's Site Address (If different than mailing address)							
6. Transporter 1 Company Name RA Senior 2355 Newburg Road, Belvidere, IL		(815) 378-9799		U.S. EPA ID Number 4954					
7. Transporter 2 Company Name				U.S. EPA ID Number					
8. Designated Facility Name and Site Address Vesha E.S. Orchard Hills Landfill, 5290 Hwy 251, Davis Junction, IL 61020 815-874-8800				U.S. EPA ID Number 1410175005					
Facility's Phone:									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1.	C-Soil w/ VOC's 870365							
	2.	870418							
	3.	870469							
	4.								
14. Special Handling Instructions and Additional Information Profile #OHL00042-008 TRUCK # 968 LICENSE PLATE#									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name Robert E. Bodine								Signature <i>Robert E. Bodine</i>	
								Month Day Year 10 12 11	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:								
	Transporter signature (for exports only):								
	17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name					Signature			Month Day Year	
Transporter 2 Printed/Typed Name					Signature			Month Day Year	
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number			
	Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)								Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1.		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a									
Printed/Typed Name					Signature			Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2610200074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987226 JJK		
		5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-762-7592								
		Generator's Site Address (if different than mailing address)								
Generator's Phone:										
6. Transporter 1 Company Name RA Southern 2355 Newbury Road, Bohriders, IL		(615) 378-9799				U.S. EPA ID Number 4954				
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address Veeva ES Orchard Hills Landfill, 8200 Hwy 251, Davis Junction, IL 61220 815-874-9000		U.S. EPA ID Number 1410179005								
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
						No.	Type			
	1.	C-Soil w/ VOC's 872357								
	2.	872407								
	3.	872459								
4.										
14. Special Handling Instructions and Additional Information Profile #08100942-018 TRUCK # LICENSE PLATE #										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offoror's Printed/Typed Name Lick Every (Believe) Albert for EPA					Signature <i>[Signature]</i>		Month Day Year 10/12/11			
TRANSPORTER INTL	16. International Shippers <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	Transporter signature (for exports only): _____									
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name					Signature		Month Day Year		
	Transporter 2 Printed/Typed Name					Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number: _____									
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number				
	Facility's Phone: _____									
	18c. Signature of Alternate Facility (or Generator)							Month Day Year		
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
	1.	2.	3.	4.						
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a									
	Printed/Typed Name Sherry Semiche					Signature <i>[Signature]</i>		Month Day Year 10/12/11		

JNA 964

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987232 JJK	
5. Generator's Name and Mailing Address Husco EPA 2613 11 th Street, Rockford, IL 61109 217-782-7392						
Generator's Site Address (if different than mailing address)						
Generator's Phone:						
6. Transporter 1 Company Name RA Santos 2355 Newburg Road, Belvidere, IL			(615) 378-9799		U.S. EPA ID Number 4954	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address Veeva ES Orchard Hills Landfill, 5200 Hwy 251, Davis Junction, IL 61020 815-874-8000					U.S. EPA ID Number 1410175003	
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
1.	C-Soil w VOC's 870394					
2.	870454					
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #01L00942-608 TRUCK # LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name Mark E. (D. L. N. D) AGEN FOR TEPA		Signature [Signature]		Month Day Year 01/12/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator (Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a)						
Printed/Typed Name		Signature		Month Day Year		

XXXXXX

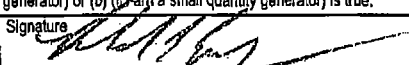
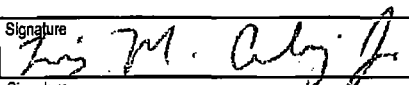
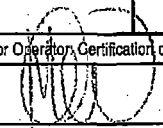
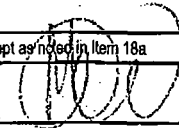
201000074

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number Illinois EPA 2513 11" Street, Rockford, IL		2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987222 JJK	
5. Generator's Name and Mailing Address 61809 217-782-7392							
Generator's Phone:							
6. Transporter 1 Company Name RA Sinton 2355 Newburg Road, Rockford, IL				U.S. EPA ID Number 4954			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address Verde 25 Orchard Hills Landfill, 8200 Hwy 251, Davis Junction, IL 61020 815-874-3600				U.S. EPA ID Number 1410175005			
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.
	1. C-Soil w/ VOC's 870102						
	2. 870169						
	3. 870203						
	4. 870291						
13. Waste Codes							
14. Special Handling Instructions and Additional Information Profile #OHL00912-003 TRUCK # LICENSE PLATE #							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Rick Gray (Signature) Robert J. Gray				Signature (Signature)		Month Day Year 04/12/11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature Month Day Year Transporter 2 Printed/Typed Name Signature Month Day Year							
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name Signature Month Day Year							

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 3010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987220 JJK		
5. Generator's Name and Mailing Address 2613 11 th Street, Rockford, IL 61109		Generator's Site Address (if different than mailing address)					
Generator's Phone:		6. Transporter 1 Company Name A. Saxon 1555 Washington Street, Des Moines, IA 50319		U.S. EPA ID Number 354			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address Veeba E. Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 815-874-9000				U.S. EPA ID Number 1410175305			
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1.	C-Soil w/ VOC's 872108					
	2.	872178					
	3.	810038					
	4.	872311					
14. Special Handling Instructions and Additional Information Profile #001L0042-008 TRUCK # 968 LICENSE PLATE #							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Rick Every (Signature)		Signature Richard Every		Month Day Year 10/12/11			
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
	Transporter signature (for exports only):						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name		Signature		Month Day Year		
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
	18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a							
Printed/Typed Name		Signature		Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of	3. Emergency Response Phone		4. Manifest Tracking Number 004987219 JJK		
5. Generator's Name and Mailing Address UNION EPA 3613 11th Street, Rockford, IL 61109					Generator's Site Address (if different than mailing address)				
Generator's Phone:									
6. Transporter 1 Company Name					U.S. EPA ID Number				
7. Transporter 2 Company Name 2355 Newburg Road, Bolingbrook, IL					U.S. EPA ID Number (815) 374-9739				
8. Designated Facility Name and Site Address					U.S. EPA ID Number				
VEOLIA ES ORCHARD HILLS LANDFILL, INC.									
Facility's Phone: 8258 HWY 251, Davis Junction, IL 61820					(618) 874-0000				
					1-800-738-3				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1	872109								
2	872181								
3	872044								
4	872316								
14. Special Handling Instructions and Additional Information									
Profile # ORHL00942-C08 TRUCK # _____ LICENSE PLATE# _____									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name Rich E. Evers (36 km) Abentia, Tapa					Signature 		Month Day Year 12/12/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
17. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name Luis M. Ambriz					Signature 		Month Day Year 12/12/11		
Transporter 2 Printed/Typed Name					Signature		Month Day Year		
18. Discrepancy									
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number:									
18b. Alternate Facility (or Generator)					U.S. EPA ID Number				
Facility's Phone:									
18c. Signature of Alternate Facility (or Generator)					Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1.		2.		3.		4.			
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name 					Signature 		Month Day Year 12/12/11		

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <i>870135</i>	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987221 JJK
5. Generator's Name and Mailing Address <i>Union EPA 2613 11th Street, Rockford, IL 61109 815-762-7592</i>					
Generator's Site Address (if different than mailing address)					
Generator's Phone:					
6. Transporter 1 Company Name <i>E.A. Seaton 2555 Highway Road, Saverton, IL 61575-2700</i>					
U.S. EPA ID Number					
7. Transporter 2 Company Name					
U.S. EPA ID Number					
8. Designated Facility Name and Site Address <i>Vonlin E.S. Orchard Hills Landfill, 9290 Hwy 251, Davis Junction, IL 61020 815-871-9000</i>					
U.S. EPA ID Number <i>1410175005</i>					
Facility's Phone:					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity
		1. <i>C-Soil w/ VOC's</i>			
		<i>870135</i>			
		2. <i>870188</i>			
		3. <i>870049</i>			
	4. <i>8702300</i>				
14. Special Handling Instructions and Additional Information <i>Trailer #04110842-003</i>					
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Offor's Printed/Typed Name <i>Rick Evers (Bodier)</i>					
Signature <i>Abeyan</i>					
Month Day Year <i>04 12 11</i>					
TRANSPORTER	16. International Shipments <input checked="" type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____				
	17. Transporter Acknowledgment of Receipt of Materials				
	Transporter 1 Printed/Typed Name <i>Don Anderson</i>				
	Signature <i>Don Anderson</i>				
	Month Day Year <i>4 12 11</i>				
DESIGNATED FACILITY	18. Discrepancy				
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection				
	Manifest Reference Number:				
	18b. Alternate Facility (or Generator)				
	U.S. EPA ID Number				
Facility's Phone:					
18c. Signature of Alternate Facility (or Generator)					
Month Day Year					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
1. 2. 3. 4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a					
Printed/Typed Name					
Signature					
Month Day Year <i>04 12 11</i>					

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number		
								004987223 JJK		
5. Generator's Name and Mailing Address										
Generator's Site Address (if different than mailing address)										
Hazardous Waste 1613 11 th Street, Rockford, IL 61109 815-762-1591										
Generator's Phone:										
6. Transporter 1 Company Name					U.S. EPA ID Number					
7. Transporter 2 Company Name					U.S. EPA ID Number					
8. Designated Facility Name and Site Address										
U.S. EPA ID Number										
Facility: 23 Orchard Hill Lane, Rockford, IL 61109 815-674-5040										
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
						No.	Type			
	1.	878140 C-Soil w/ VOC's								
	2.	878194								
	3.	878853								
4.	878331									
14. Special Handling Instructions and Additional Information										
Profile #OHL0942-008 TRUCK # 334 LICENSE PLATE# 30214										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name										Month Day Year
Richard E. Evans (Signature) Robert L. Evans (Signature)										04/12/11
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
	Transporter signature (for exports only):									
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name					Signature				
JOHN C FIAVERCO					JOHN C FIAVERCO					14/12/11
Transporter 2 Printed/Typed Name					Signature					Month Day Year
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number:									
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number				
	Facility's Phone:									
18c. Signature of Alternate Facility (or Generator)										
Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. 2. 3. 4.										
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a										
Printed/Typed Name					Signature					Month Day Year
										04/16/11

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300674	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987224 JJK	
5. Generator's Name and Mailing Address Hess EPA 2615 11 th Street, Rockford, IL 61109 217-762-7592		Generator's Site Address (if different than mailing address)				
Generator's Phone:						
6. Transporter 1 Company Name H.A. Senior 2355 Newburg Road, Oak View, IL		(615) 378-9799		U.S. EPA ID Number 4954		
7. Transporter 2 Company Name APP				U.S. EPA ID Number		
8. Designated Facility Name and Site Address Veolia ES Oakbrook Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61020 815-574-3900				U.S. EPA ID Number 1410175085		
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w VOC's 870146					
2.	870196					
3.	870256					
4.	870337					
14. Special Handling Instructions and Additional Information Profile #0HL00942-003 TRUCK # 9611 LICENSE PLATE# P545620						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Rick Even (Bodine) Agent for EPA		Signature Rick Even		Month Day Year 04 12 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name APPELHANS TRUCKING Signature Gary Appelhaus Month Day Year 04 12 11 Transporter 2 Printed/Typed Name Signature Month Day Year						
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number 18b. Alternate Facility (or Generator) Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name Signature Month Day Year						

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010300074			004987225 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Humboldt EPA 2613 11 th Street, Rockford, IL 61109		217-762-7592				
Generator's Phone:						
6. Transporter 1 Company Name		U.S. EPA ID Number				
RA Saxon 2255 Newburg Road, Batavia, IL		(615) 376-9799		4934		
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
Veolia ES Orchard Hills Landfill, 6790 Hwy 251, Davis Junction, IL 61020		615-874-9880		1410175905		
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 870150					
2.	870199					
3.	870260					
4.	872342					
14. Special Handling Instructions and Additional Information						
Profile #OHL00942-608 TRUCK # LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name		Signature		Month Day Year		
Rick Evely (BODINE) Agent for IEPA		[Signature]		04 12 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987305 JJK		
		5. Generator's Name and Mailing Address Union EPA 2618 11th Street, Rockford, IL 61109 217-762-7592		Generator's Site Address (if different than mailing address)						
Generator's Phone:										
6. Transporter 1 Company Name PA Kouton 2355 New Ave Road, Bala Cynwyd, IL 61003 217-762-7592		U.S. EPA ID Number 1454								
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address Veeha ES Orchard Hills Landfill, 8290 Hwy 251, Dixon Junction, IL 61029 815-874-2000		U.S. EPA ID Number 1410175885								
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
						No.	Type			
	1.	C-Soil w/ VOC's 87/012				001	DT	15	Y	
	2.									
	3.									
	4.									
14. Special Handling Instructions and Additional Information TRUCK # 330 LICENSE PLATE										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name BRETT BAKER AS AGENT FOR IEPA										
Signature [Signature]										
Month Day Year 04 07 11										
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name SCA 10025									
DESIGNATED FACILITY	Signature [Signature]									
	Month Day Year 04 07 11									
	Transporter 2 Printed/Typed Name									
	Signature [Signature]									
	Month Day Year 04 07 11									
18. Discrepancy										
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
Manifest Reference Number:										
18b. Alternate Facility (or Generator) U.S. EPA ID Number										
Facility's Phone:										
18c. Signature of Alternate Facility (or Generator) Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. 2. 3. 4.										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name [Signature]										
Signature [Signature]										
Month Day Year 04 07 11										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987304 JJK			
5. Generator's Name and Mailing Address Illinois EPA 2615 11th Street, Rockford, IL 61169 217-782-7592				Generator's Site Address (if different than mailing address)				
Generator's Phone:								
6. Transporter 1 Company Name E.A. Keaton 2355 Newburg Road, Bolingbrook, IL		(615) 376-9799		U.S. EPA ID Number 4954				
7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address Veolia ES Ontario 8116 Lantz Rd, 8290 Hwy 251, Davis Junction, IL 61010 815-878-9839				U.S. EPA ID Number 1410175085				
Facility's Phone:								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		No.	Type					
1.	C-Soil w/ VOC's 870689	001	DT	15	Y			
2.	870741							
3.	820826							
4.								
14. Special Handling Instructions and Additional Information Profile #00109942-603 TRUCK # 343 LICENSE PLATE# 26 217V								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 282.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offeror's Printed/Typed Name BRETT BAKER AS AGENT FOR IEPA				Signature <i>[Signature]</i>		Month Day Year 04 07 11		
16. International Shipments		<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:		
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name Luis M. Ambroz		Signature <i>[Signature]</i>				Month Day Year 04 07 11		
Transporter 2 Printed/Typed Name		Signature				Month Day Year		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator)				U.S. EPA ID Number				
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1.	2.	3.	4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name NA				Signature <i>[Signature]</i>		Month Day Year 04 07 11		

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010300074			004987303 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Hillman EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592						
Generator's Phone:						
6. Transporter 1 Company Name		U.S. EPA ID Number				
E.A. Baker 2245 Newbury Road, Oakridge, IL 61453 815-376-6704		4954				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
Veeva ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 815-374-8800		1410175005				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 870446	001	DT	15	Y	
2.	870932					
3.	870808					
4.						
14. Special Handling Instructions and Additional Information						
Profile #UHL00942-803 TRUCK # 9670 LICENSE PLATE# 354 657						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name		Signature		Month	Day	Year
BRETT BAKER AS AGENT FOR ICPA		Brett Baker		04	07	11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month	Day	Year
ROBERT BAKER		Robert Baker		04	07	11
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month	Day	Year
NA		[Signature]		04	07	11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987302 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2615 11th Street, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name RA Seaton 2355 Newburg Road, Bolingbrook, IL			(615) 378-9799		U.S. EPA ID Number 4954	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address Yochim ES Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 815-874-9300					U.S. EPA ID Number 1410175095	
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's	001	DT	15	Y	
2.	870728					
3.	870795					
4.						
14. Special Handling Instructions and Additional Information Profile #0HL00942-008 TRUCK # 350 LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name BRETT BAKER AS AGENT FOR ICPA			Signature <i>[Signature]</i>		Month Day Year 04 07 11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Ben Larson			Signature <i>[Signature]</i>		Month Day Year 4 7 11	
Transporter 2 Printed/Typed Name			Signature		Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input checked="" type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator)			U.S. EPA ID Number			
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)					Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name Ben			Signature <i>[Signature]</i>		Month Day Year 04 07 11	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987301 JJK			
		5. Generator's Name and Mailing Address <u>Union EPA, 1613 11th Street, Rockford, IL 61105</u>									
Generator's Phone:		6. Transporter 1 Company Name <u>U.S. Environmental Services, 2555 Newburg Road, Oakbrook, IL 60155</u>						U.S. EPA ID Number			
7. Transporter 2 Company Name		U.S. EPA ID Number						8. Designated Facility Name and Site Address			
Facility's Phone:		<u>Vesta E S Orchard Hills Landfill, 6290 Hwy 251, Davis Junction, IL 61020 815-874-3000</u>						U.S. EPA ID Number <u>141017305</u>			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes					
		No.	Type								
1.	<u>870639</u>	<u>001</u>	<u>DT</u>	<u>15</u>	<u>Y</u>						
2.	<u>870710</u>										
3.	<u>870782</u>										
4.											
14. Special Handling Instructions and Additional Information <u>Profile #CHL00942-008</u> <u>TRUCK # 606</u> <u>LICENSE PLATE # P551159</u>											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Officer's Printed/Typed Name <u>BRETT BAKER</u>		Signature <u>Baker</u>				Month Day Year <u>04 07 11</u>					
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____											
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <u>Gary Uih</u> Signature <u>Gary Uih</u> Month Day Year <u>04 07 11</u> Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____											
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____											
18b. Alternate Facility (or Generator)						U.S. EPA ID Number					
Facility's Phone:											
18c. Signature of Alternate Facility (or Generator)						Month Day Year					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.	2.	3.	4.								
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name		Signature				Month Day Year					

Via 606

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987300 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-792-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name R.A. Senton 2355 Newburg Road, Belvidere, IL			(815) 378-9799		U.S. EPA ID Number 4954	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address Veeha ES Orchard Hills Lane 1611, 5220 Hwy 251, Union Junction, IL 61836 815-874-9800			U.S. EPA ID Number 1418175005			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 870642	001	Dr	15	Y	
2.						
3.	870703					
4.	810768					
14. Special Handling Instructions and Additional Information Profile #OHL00942-018 TRUCK #323 LICENSE PLATE# P555898						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name BRETT BAICER AS AGENT FOR ICA		Signature BNA GRU		Month Day Year 04 07 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Herb Veho		Signature Herb Veho		Month Day Year 4 7 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name GA		Signature GA		Month Day Year 07 07 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 201000074		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number 004987299 JJK			
		5. Generator's Name and Mailing Address Minis EPA 2613 11th Street, Rockford, IL 61109 217-782-7592						Generator's Site Address (if different than mailing address)			
Generator's Phone:		6. Transporter 1 Company Name R.A. Seaton 2355 Weinberg Road, Belvidere, IL (815) 378-9799						U.S. EPA ID Number 4954			
		7. Transporter 2 Company Name						U.S. EPA ID Number			
		8. Designated Facility Name and Site Address Veneta ES Orchard Hills Landfill, 8200 Hwy 251, Davis Junction, IL 61020 815-774-9000						U.S. EPA ID Number 1410173085			
Facility's Phone:											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		1. C-Soil w/ VOC's 870624									
		2. 870679									
		3. 870751									
		4.									
14. Special Handling Instructions and Additional Information Profile #OHL00942-003 TRUCK # 951 LICENSE PLATE # 613A527											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Officer's Printed/Typed Name BRETT BAKER AS AGENT FOR ICPO Signature <i>[Signature]</i> Month 04 Day 07 Year 11											
TRANSPORTER	16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:										
	Transporter signature (for exports only):										
	17. Transporter Acknowledgment of Receipt of Materials										
	Transporter 1 Printed/Typed Name Tom Harris				Signature <i>[Signature]</i>		Month 04 Day 07 Year 11				
	Transporter 2 Printed/Typed Name				Signature		Month		Day Year		
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number:										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number										
	Facility's Phone:										
	18c. Signature of Alternate Facility (or Generator)								Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.			2.			3.			4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name HA				Signature <i>[Signature]</i>				Month 04 Day 07 Year 11			

HAR 951

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010300074			004987309 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Illinois EPA 2612 11 th Street, Rockford, IL 61109		217-782-7592				
Generator's Phone:						
6. Transporter 1 Company Name		U.S. EPA ID Number				
EA Station 1555 Newbury Road, Bolingbrook, IL		(615) 375-4799		4954		
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
Veolia ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61020		615-874-9002		1419175015		
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's	870384				
2.		870446				
3.		870501				
4.						
14. Special Handling Instructions and Additional Information						
Profile #06100942-003 TRUCK # LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name		Signature		Month Day Year		
BRET BAKER AS AGENT FOR IEPA		[Signature]		04 06 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator)		U.S. EPA ID Number				
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)		Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		
NA		[Signature]		04 06 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number		
								004987306 JJK		
5. Generator's Name and Mailing Address <u>Union EPA 2012 11th Street, Rockford, IL 61109</u> Generator's Site Address (if different than mailing address)										
Generator's Phone: <u>RA Saxon 2355 Newbury Road, Bolingbrook, IL 60440</u>										
6. Transporter 1 Company Name						U.S. EPA ID Number				
7. Transporter 2 Company Name						U.S. EPA ID Number				
8. Designated Facility Name and Site Address						U.S. EPA ID Number				
<u>Veolia ES Orchard Hills Landfill 8290 Hwy 251, Davis Junction, IL 61070 815-574-9790</u>						<u>1410175095</u>				
Facility's Phone:										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit WT/Vol.	13. Waste Codes
	1.	<u>C-Soil w/ VOC's 870433</u>				<u>001 DT</u>		<u>15</u>	<u>Y</u>	
	2.	<u>870496</u>								
	3.									
	4.									
14. Special Handling Instructions and Additional Information										
<u>Profile #OHL00942-608 TRUCK # 9670 LICENSE PLATE# 354652</u>										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name					Signature		Month Day Year			
<u>BRETT BAKER AS AGENT FOR IEI</u>					<u>Brett Baker</u>		<u>04 06 11</u>			
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
	Transporter signature (for exports only):									
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name					Signature		Month Day Year		
<u>ROBERT BAKER</u>					<u>Robert Baker</u>		<u>4 6 11</u>			
Transporter 2 Printed/Typed Name					Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number:									
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number			
	Facility's Phone:									
18c. Signature of Alternate Facility (or Generator)						Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1.		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name					Signature		Month Day Year			
<u>CH</u>					<u>CH</u>		<u>4 06 11</u>			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987310 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2615 11th Street, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name RA Jordan 2555 Newbury Road, Oakridge, IL (815) 378-9799			U.S. EPA ID Number 4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Verla ES Orchard Hills Landfill 2290 Hwy 251, Davis Junction, IL 61020 815-874-9880			U.S. EPA ID Number 1410175865			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Soil w/ VOC's 870424	XX1	DT	15	Y	
2.	870494					
3.						
4.						
14. Special Handling Instructions and Additional Information Profile #0HL00947-002 TRUCK # 606 LICENSE PLATE # 8551159						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name BRETT BARCA AS AGENT FOR ILPA		Signature <i>[Signature]</i>		Month Day Year 04 06 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Gary Via		Signature <i>[Signature]</i>		Month Day Year 04 06 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name [Signature]		Signature <i>[Signature]</i>		Month Day Year 04 06 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		7010360074			004987307 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Illinois EPA 2515 11 th Street, Rockford, IL 61109 317-792-7502						
Generator's Phone:						
6. Transporter 1 Company Name		U.S. EPA ID Number				
RA Reichen 2355 Newberry Road, Kildeer, IL (815) 372-9780		A054				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
Vesla FS Orchard Hills Landfill, 8290 Hwy 251, Downs Junction, IL 61030 815-574-5800		1410175005				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
		No.	Type			
1.	C-Soil w/ VOC's 870360	001	DT	15	Y	
2.	870425					
3.	870487					
4.						
14. Special Handling Instructions and Additional Information						
Profile #OHL00942-608 TRUCK # LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name		Signature		Month	Day	Year
BRETT BAKER AS AGENT FOR ILPA		[Signature]		04	06	11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature			Month	Day Year
Transporter 2 Printed/Typed Name		Signature			Month	Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature			Month	Day Year
[Signature]		[Signature]			04	06 11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987311 JJK			
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-752-7592				Generator's Site Address (if different than mailing address)				
Generator's Phone:								
6. Transporter 1 Company Name RA Senter 2855 Newbury Road, Hoboken, NJ (615) 378-9730				U.S. EPA ID Number 4954				
7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address Volina F.S. Orchard 8184 Landell, 8290 Hwy 251, Durbin Junction, IL 61620 615-574-9600				U.S. EPA ID Number 1416175085				
Facility's Phone:								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes		
		No.	Type					
1.	C-SOIL w/ VOC's	870407	001 DT	15	Y			
2.	870477							
3.								
4.								
14. Special Handling Instructions and Additional Information Profile #DHL00947-608 TRUCK # 9611 LICENSE PLATE# P545620 IL								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded; and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name BRETT BAKER AS AGENT FOR IEPA				Signature <i>[Signature]</i>		Month Day Year 04 06 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name GARY APPELHANS				Signature <i>[Signature]</i> #9611		Month Day Year 04 06 11		
Transporter 2 Printed/Typed Name				Signature		Month Day Year		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1.			2.			3.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a								
Printed/Typed Name PA				Signature <i>[Signature]</i>		Month Day Year 04 06 11		

APP 9/6/11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number			
								004987320 JJK			
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)									
RA. Santos 2355 Newburg Road, Oakridge, IL 61050 315-874-9799		2010360474 Illinois EPA 2615 11 th Street, Rockford, IL 61109 217-782-7502									
Generator's Phone:											
6. Transporter 1 Company Name		U.S. EPA ID Number									
RA. Santos 2355 Newburg Road, Oakridge, IL 61050 315-874-9799		4954									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address		U.S. EPA ID Number									
Veeva ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61020 315-874-9800		1410175095									
Facility's Phone:											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
	1.	C-Soil w/ VOC's 8691630				001	DT	15	Y		
	2.	869694									
	3.	869740									
	4.	869791									
14. Special Handling Instructions and Additional Information											
Profile #00100942-008 TRUCK # 606 LICENSE PLATE 274894											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name					Signature			Month Day Year			
R.L. McFate AGENT FOR JJA					[Signature]			04/05/11			
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:										
	Transporter signature (for exports only):										
	17. Transporter Acknowledgment of Receipt of Materials										
	Transporter 1 Printed/Typed Name					Signature			Month Day Year		
	Gary Via					[Signature]			11/15/11		
	Transporter 2 Printed/Typed Name					Signature			Month Day Year		
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number:										
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number					
	Facility's Phone:										
	18c. Signature of Alternate Facility (or Generator)								Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.			2.			3.			4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name					Signature			Month Day Year			
[Signature]					[Signature]			01/05/11			

VIA 6060

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number 004987321 JJK		
5. Generator's Name and Mailing Address Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592		Generator's Site Address (if different than mailing address)					
Generator's Phone:							
6. Transporter 1 Company Name R.A. Sutton 2335 Newburg Road, Belvidere, IL (815) 376-9799		U.S. EPA ID Number 4254					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address Veritas E.S. Orchard Hills Landfill, 6200 Hwy 251, Davis Junction, IL 61620 815-274-9060		U.S. EPA ID Number 1410175085					
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
1.	C-Soil w/ VOC's 869561	001	DT	15	Y		
2.	869609						
3.	869664						
4.	869721						
14. Special Handling Instructions and Additional Information Profile #OHL0042-08 TRUCK # 350 LICENSE PLATE # 1G79635							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Roy M. Tate AGENT FOR EPA		Signature [Signature]		Month 04	Day 05	Year 11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Ben Arsen		Signature [Signature]		Month 4	Day 11	Year 11	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:				U.S. EPA ID Number			
18b. Alternate Facility (or Generator)							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)					Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a							
Printed/Typed Name [Signature]		Signature [Signature]		Month 04	Day 05	Year 11	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>20000000774</u>	2. Page 1 of <u>1</u>	3. Emergency Response Phone <u></u>	4. Manifest Tracking Number 004987324 JJK			
5. Generator's Name and Mailing Address <u>Illinois EPA 2513 11th Street, Rockford, IL 61109 217-962-7592</u>				Generator's Site Address (if different than mailing address) <u></u>				
Generator's Phone: <u></u>								
6. Transporter 1 Company Name <u>RA Saxon 2345 Newbury Road, Peabody, IL</u>				U.S. EPA ID Number <u>615-876-9799</u>		U.S. EPA ID Number <u>141017995</u>		
7. Transporter 2 Company Name <u></u>				U.S. EPA ID Number <u></u>				
8. Designated Facility Name and Site Address <u>Verde ES Orchard Hills Farm 600, 8290 Hwy 251, Davis Junction, IL 61620 815-874-8900</u>				U.S. EPA ID Number <u>141017995</u>				
Facility's Phone: <u></u>								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		No.	Type					
1.	C-Soil w/ VOC's <u>869553</u>	<u>001</u>	<u>DT</u>	<u>15</u>	<u>Y</u>			
2.	" <u>869598</u>							
3.	" <u>869650</u>							
4.	" <u>869714</u>							
14. Special Handling Instructions and Additional Information <u>Profile #DUE0042-008 TRUCK # 357 LICENSE PLATE # 3714</u>								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement (identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name <u>TRACY M. FINE</u>				Signature <u>[Signature]</u>		Month Day Year <u>04 05 11</u>		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: <u></u> Transporter signature (for exports only): <u></u> Date leaving U.S.: <u></u>								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name <u>Dan Kalina</u>				Signature <u>[Signature]</u>		Month Day Year <u>04 05 11</u>		
Transporter 2 Printed/Typed Name <u></u>				Signature <u></u>		Month Day Year <u></u>		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number: <u></u>								
18b. Alternate Facility (or Generator) U.S. EPA ID Number <u></u>								
Facility's Phone: <u></u>								
18c. Signature of Alternate Facility (or Generator) Month Day Year <u></u>								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1.	2.	3.	4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name <u>[Signature]</u>				Signature <u>[Signature]</u>		Month Day Year <u>04 05 11</u>		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 201080074	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number 004987323 JJK		
5. Generator's Name and Mailing Address Minors RPA 2613 11th Street, Rockford, IL 61109 217-762-7592		Generator's Site Address (if different than mailing address)					
Generator's Phone:							
6. Transporter 1 Company Name RA Seaton 2355 Newburg Road, Melvindale, IL (615) 376-9799		U.S. EPA ID Number 4954					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address Veeha ES Orchard Hills Landfill, 5290 Hwy 251, Davis Junction, IL 61026 815-874-9000		U.S. EPA ID Number 1410175005					
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes	
1.	C-Soil w/ VOC's 8109550	001	DT	15	Y		
2.	8109598						
3.	8109643						
4.	869 702						
14. Special Handling Instructions and Additional Information Profile #CEH00942-003 TRUCK # 980 LICENSE PLATE # P 683663							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Officer's Printed/Typed Name 1 Roy McPate AGENT FOR IEPA Signature [Signature] Month 04 Day 05 Year 11							
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Brian Myers RA Seaton Signature [Signature] Month 04 Day 05 Year 11 Transporter 2 Printed/Typed Name Signature Month Day Year							
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number 18b. Alternate Facility (or Generator) Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name [Signature] Signature [Signature] Month 04 Day 05 Year 11							

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074		2. Page 1 of 1		3. Emergency Response Phone		4. Manifest Tracking Number 004987322 JJK						
		5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-762-7592						Generator's Site Address (if different than mailing address)						
Generator's Phone:		6. Transporter 1 Company Name R.A. Sutton 2355 Newburg Road, Oakridge, IL (615) 376-9799				U.S. EPA ID Number 4954								
		7. Transporter 2 Company Name				U.S. EPA ID Number								
		8. Designated Facility Name and Site Address Venita 25 Orchard Hills Lane, IL 6290 Hwy 251, Davis Junction, IL 61020 615-574-9000				U.S. EPA ID Number 1410175005								
Facility's Phone:														
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes				
						No.	Type							
	1.	C-Soil w/ VOC's 869543				001	DT	15	Y					
	2.	869587												
	3.	869631												
	4.	869700												
14. Special Handling Instructions and Additional Information Profile NOEL00942-008 TRUCK # 951 LICENSE PLATE# 613M527														
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.														
Generator's/Officer's Printed/Typed Name Roy McATE AGENT FOR TEPA										Signature <i>[Signature]</i>		Month 04	Day 05	Year 11
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____													
	17. Transporter Acknowledgment of Receipt of Materials													
	Transporter 1 Printed/Typed Name Tom Harms					Signature <i>[Signature]</i>					Month 4	Day 5	Year 11	
Transporter 2 Printed/Typed Name					Signature					Month	Day	Year		
DESIGNATED FACILITY	18. Discrepancy													
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection													
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____													
	Facility's Phone: _____													
	18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____													
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)														
1.			2.			3.			4.					
20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a														
Printed/Typed Name <i>[Signature]</i>					Signature <i>[Signature]</i>					Month 04	Day 05	Year 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010300074	1		004987325 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Illinois EPA 2615 11 th Street, Rockford, IL 61109		217-782-7592				
Generator's Phone:						
6. Transporter 1 Company Name		RA Santon 2855 Newburg Road, DeKalb, IL			U.S. EPA ID Number	
		(615) 378-9799			4934	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address					U.S. EPA ID Number	
Veeva ES Orchard Hill Landfill, 8290 Hwy 251, Davis Junction, IL 61020		815-874-9800			1410175805	
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	C-Soil w/ VOC's 869763	001	DT	15	Y	
2.	869813					
3.	869865					
4.						
14. Special Handling Instructions and Additional Information						
Profile #OHL00942-008 TRUCK # 350 LICENSE PLATE #						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name		Signature			Month Day Year	
Troy McFEE Mount Fort EPA		[Signature]			04 05 11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature			Month Day Year	
Ben Hansen		[Signature]			9 5 11	
Transporter 2 Printed/Typed Name		Signature			Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature			Month Day Year	
[Signature]		[Signature]			04 05 11	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010300074	1		004987287 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Illinois EPA 2613 11 th Street, Rockford, IL 61109		217-782-7592				
Generator's Phone:						
6. Transporter 1 Company Name		U.S. EPA ID Number				
RA Seaton 2355 Newbury Road, Bolingbrook, IL		(815) 378-9799			4954	
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
Vandalia E S Orchard Hill, and 511, 8290 Hwy 251, Davis Junction, IL 61028		815-874-9000			1410173085	
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
		No.	Type			
1.	C-3oil w/ VOC's 869758	001	DT	15	Y	
2.	869809					
3.	869859					
4.						
14. Special Handling Instructions and Additional Information						
Profile #OHL02942-003 TRUCK # 357 LICENSE PLATE# 3714						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name		Signature		Month	Day	Year
Toby McNamee Agent for JPLA		[Signature]		04	05	11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month	Day	Year
Dan Kalina		[Signature]		04	05	11
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month	Day	Year
[Signature]		[Signature]		04	05	11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number	
					004987289 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
Illinois EPA 2613 11 th Street, Rockford, IL 61109 217-782-7592						
Generator's Phone:						
6. Transporter 1 Company Name		U.S. EPA ID Number				
EPA States 2335 Newbark Road, Bolingbrook, IL 60440 815-375-9739		4954				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
Vocals ES Orchard Hills Inc 8290 Hwy 251, Davis Junction, IL 61020 815-874-9800		1410175035				
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
1.	C-Soil w/ VOC's 869746	001	DT	15	Y	
2.	869796					
3.	869850					
4.						
14. Special Handling Instructions and Additional Information						
Profile #OHL00941-93 TRUCK # LICENSE PLATE#						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name		Signature		Month Day Year		
Tony McFarland for LEPA		Tony McFarland		04 05 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
Tom Harms		Tom Harms		4 5 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a: Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		
O. Harms		O. Harms		04 05 11		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074		2. Page 1 of 1		3. Emergency Response Phone		4. Manifest Tracking Number 004987286 JJK			
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 217-782-7592						Generator's Site Address (if different than mailing address)					
Generator's Phone:											
6. Transporter 1 Company Name McA Saxon 2355 Hawburg Road, Rockford, IL (815) 376-9799						U.S. EPA ID Number 4934					
7. Transporter 2 Company Name						U.S. EPA ID Number					
8. Designated Facility Name and Site Address Voclin E5 Orchard Hills Road 601, 0290 Hwy 251, Davis Junction, IL 61020 815-474-9200						U.S. EPA ID Number 1410175105					
Facility's Phone:											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes	
						No.	Type				
	1.	C-501 w/ VOC's 869846				001	DT	15	Y		
	2.										
	3.										
4.											
14. Special Handling Instructions and Additional Information Profile #04100947-008 TRUCK #606 LICENSE PLATE #274894											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name Troy McEne ASST DIR I EPA						Signature <i>Troy McEne</i>		Month Day Year 04/05/11			
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Gary Via Signature <i>Gary Via</i> Month Day Year 04/05/11 Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____										
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	18b. Alternate Facility (or Generator) _____ Manifest Reference Number: _____ U.S. EPA ID Number _____										
	Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.		2.		3.		4.					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name AM Signature <i>AM</i> Month Day Year 04/05/11											

VIA 606

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987313 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2515 11th Street, Rockford, IL 61109 217-782-7592			Generator's Site Address (if different than mailing address)			
Generator's Phone:						
6. Transporter 1 Company Name R.A. Saxon 2335 Newburg Road, Bolingbrook, IL (815) 378-9799			U.S. EPA ID Number 4954			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address Vesha ES Orchard Hills Landfill, 8290 Hwy 251, Dixon Junction, IL 61029 815-874-9000			U.S. EPA ID Number 1418175005			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	C-Sol w/ VOC's 8700118	001	DT	15	Y	
2.	870141					
3.	870223					
4.	870371					
14. Special Handling Instructions and Additional Information Profile #00110042-608 TRUCK # 9670 LICENSE PLATE# 354652						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name BRETT BAKER		Signature <i>Brett Baker</i>		Month Day Year 04 06 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name ROBERT BAKER		Signature <i>Robert Baker</i>		Month Day Year 4 6 11		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987312 JJK			
5. Generator's Name and Mailing Address Illinois EPA 2613 11th Street, Rockford, IL 61109 201-782-7300				Generator's Site Address (if different than mailing address)				
Generator's Phone:								
6. Transporter 1 Company Name EA Station 2355 Newburg Road, Bolingbrook, IL (615) 376-9790				U.S. EPA ID Number 4954				
7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address Veeva ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61020 815-674-9000				U.S. EPA ID Number 1410173005				
Facility's Phone:								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1.	C-Soil w/ VOC's 870043	001	DT	15	Y		
	2.	870196						
	3.	870363						
4.	870349							
14. Special Handling Instructions and Additional Information Profile #OIL00942-GOE TRUCK #606 LICENSE PLATE P551159								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name BRETT BAKER AS AGENT FOR KPA				Signature <i>Brett Baker</i>		Month Day Year 04 06 11		
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name Gary Via				Signature <i>Gary Via</i>		Month Day Year 04 06 11	
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name				Signature		Month Day Year	
	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number:							
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number			
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1.		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>		Month Day Year 04 06 11		

Via bob

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number		
								004987316 JJK		
5. Generator's Name and Mailing Address <u>Missouri EPA 2613 11th East, Rockford, IL 61101</u> Generator's Site Address (if different than mailing address)										
Generator's Phone: _____										
6. Transporter 1 Company Name <u>W.A. Smith & 2335 Newburg Road, Braidwood, IL</u> U.S. EPA ID Number										
7. Transporter 2 Company Name _____ U.S. EPA ID Number										
8. Designated Facility Name and Site Address _____ U.S. EPA ID Number										
Facility's Phone: <u>Verona 25 Orchard Hill Lane, 5290 Hwy 251, Davis Junction, IL 61820 815.374.9000</u> 1416173005										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
						No.	Type			
	1.	870030				001	DT			
	2.	870116								
	3.	870215								
	4.	870294								
14. Special Handling Instructions and Additional Information										
Profile # <u>OH100942-008</u> TRUCK # <u>320</u> LICENSE PLATE # <u>PL 17365</u>										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name <u>BRETT BAKER</u> AS AGENT FOR IEPA Signature <u>Brett Baker</u> Month <u>04</u> Day <u>06</u> Year <u>11</u>										
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	Transporter signature (for exports only): _____									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name _____				Signature _____		Month _____ Day _____ Year _____			
	Transporter 2 Printed/Typed Name _____				Signature _____		Month _____ Day _____ Year _____			
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number: _____									
	18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number									
	Facility's Phone: _____									
	18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
	1.	2.	3.	4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a										
Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 201030074	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987315 JJK	
5. Generator's Name and Mailing Address Illinois EPA 2013 17th Street, Rockford, IL 61109 815-782-7592						
Generator's Site Address (if different than mailing address)						
Generator's Phone: _____						
6. Transporter 1 Company Name F.A. Scott & Sons 2855 Newburg Road, Moline, IL 61201 815-396-9799				U.S. EPA ID Number 254		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address Veolia ES Orchard Hills Landfill, 8290 Hwy 251, Davis Junction, IL 61029 815-274-9080				U.S. EPA ID Number 1410175005		
Facility's Phone: _____						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol.
	1.	C-Soil w/ VOC's	001	DT	15	Y
	2.	870104				
	3.	870209				
	4.	870277				
13. Waste Codes						
14. Special Handling Instructions and Additional Information Profile #DHL00942-009 TRUCK # _____ LICENSE PLATE# _____						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name BRETT BAKER AS AGENT FOR IEPA				Signature <i>Brett Baker</i>		Month Day Year 04 06 11
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____					
	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name Tom Hamms				Signature <i>Tom Hamms</i>	
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name				Signature	
	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number: _____					
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number	
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)						
Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name Har 951				Signature <i>Har 951</i>		Month Day Year 04 06 11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number		
		2010200074			004987314 JJK		
5. Generator's Name and Mailing Address		Generator's Site Address (If different than mailing address)					
Hixson EPA 2613 11 th Street, Rockford, IL 61109 217-782-7502							
Generator's Phone:							
6. Transporter 1 Company Name		RA Seaton 2335 Newburg Road, Belvidere, IL (615) 373-9739			U.S. EPA ID Number 4934		
7. Transporter 2 Company Name					U.S. EPA ID Number		
8. Designated Facility Name and Site Address		Vesta ES Orchard Hills Landfill, 4290 Hwy 251, Davis Junction, IL 61820 615-674-9000			U.S. EPA ID Number 1410175805		
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
1.	C-Soil w/ VOC's 870060	001	DT	15	Y		
2.	870164						
3.	870243						
4.	870335						
14. Special Handling Instructions and Additional Information							
Profile #06100942-002 TRUCK # 9611 LICENSE PLATE# P545620							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name		Signature			Month	Day	Year
BRETT BAKER AS AGENT FOR IEPA		Brett Baker			04	06	11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:					
Transporter signature (for exports only):		Date leaving U.S.:					
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name		Signature			Month	Day	Year
GARY APPELHANS # 9611		Gary Appelhaus			04	06	11
Transporter 2 Printed/Typed Name		Signature			Month	Day	Year
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator)		U.S. EPA ID Number					
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)					Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature			Month	Day	Year
APP 9611		APP 9611			04	06	11

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 004987317 JJK		
5. Generator's Name and Mailing Address Waste EPA 7513 11th Street, Rockford, IL 61109 217-782-7592		Generator's Site Address (if different than mailing address)					
Generator's Phone:							
6. Transporter 1 Company Name		U.S. EPA ID Number					
7. Transporter 2 Company Name K.A. Seaton 2355 Newburg Road, Bolingbrook, IL 60440 (815) 378-9799		U.S. EPA ID Number					
8. Designated Facility Name and Site Address Veeha ES Orchard Hills Landfill, 3200 Hwy 251, Davis Junction, IL 61020 815-874-9660		U.S. EPA ID Number 1419175885					
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes
	1.	C-501 w/ VOC's 8700000	001	ST	001	Y	
	2.	C-501 w/ VOC's 870004					
	3.	8702200					
	4.	8702287					
14. Special Handling Instructions and Additional Information Profile #OHL00942-608 TRUCK # LICENSE PLATE #							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name BRETT GACEK AS AGENT FOR IEPA		Signature <i>Brett Gacek</i>		Month Day Year 04 06 11			
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
	Transporter signature (for exports only):						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Stall 1000s		Signature <i>[Signature]</i>		Month Day Year 4 6 11		
TRANSPORTER	Transporter 2 Printed/Typed Name		Signature <i>[Signature]</i>		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number						
DESIGNATED FACILITY	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator) Month Day Year						
DESIGNATED FACILITY	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1.	2.	3.	4.			
DESIGNATED FACILITY	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
	Printed/Typed Name MA		Signature <i>[Signature]</i>		Month Day Year 04 06 11		

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		2010300074	1	800 942 8782	008433183 JJK	
5. Generator's Name and Mailing Address IL EPA 1021 North Grand Avenue East Springfield IL 62702		Generator's Site Address (if different than mailing address) IL EPA 2813 11th Street Rockford IL 61109				
Generator's Phone: 217 722-1502						
6. Transporter 1 Company Name Advanced Waste Carriers, Inc.		U.S. EPA ID Number W10000215321				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address Advanced Waste Services - Chairworks 3901L West McKinley Ave Milwaukee WI 53208		U.S. EPA ID Number W1R000138572				
Facility's Phone: 414 342 1852						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
	Non-RCRA regulated, Non-DOT hazardous liquid material	001 TT		5000	G	NONE
2						
3						
4						
14. Special Handling Instructions and Additional Information 1) 4143115-X-B-2 VOC Contaminated Groundwater						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Troy McTear		Signature Troy McTear		Month Day Year 10/13/11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Derek Humilia Signature Derek Humilia Month Day Year 10/13/11 Transporter 2 Printed/Typed Name Signature Month Day Year						
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection (2) Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Andrew Ackman Signature Andrew Ackman Month Day Year 10/13/11						

Please print or type. (Form designed for use on effie (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074		2. Page 1 of 1	3. Emergency Response Phone 800 342 8742		4. Manifest Tracking Number 008433185 JJK		
5. Generator's Name and Mailing Address IL EPA 1021 North Grand Avenue East Springfield IL 62702				Attn: Doyle Wilson		Generator's Site Address (if different than mailing address) IL EPA 2619 11th Street Rockford IL 61108			
Generator's Phone: 217 782-7592									
6. Transporter 1 Company Name Advanced Waste Carriers, Inc.						U.S. EPA ID Number WI 0000015381			
7. Transporter 2 Company Name						U.S. EPA ID Number			
8. Designated Facility Name and Site Address Advanced Waste Services - Chemworks 3801L West McKinley Ave Milwaukee WI 53208						U.S. EPA ID Number WI R 000136572			
Facility's Phone: 414 342 1852									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt/Lb/L	13. Waste Codes
		1. Non-RCRA regulated. Non-DOT hazardous liquid material			No.	Type			
					001	TT	500	G	NONE
		2.							
		3.							
	4.								
14. Special Handling Instructions and Additional Information 1) 41449115-X-B-2 VOC Contaminated Groundwater									
TRAILER 518									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name DOYLE WILSON				Signature <i>[Signature]</i>		Month Day Year 10/13/11			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
17. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name Denny Hillyer				Signature <i>[Signature]</i>		Month Day Year 10/13/11			
Transporter 2 Printed/Typed Name				Signature		Month Day Year			
18. Discrepancy									
18a. Discrepancy Indication Spec <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number: _____									
18b. Alternate Facility (or Generator) U.S. EPA ID Number									
Facility's Phone: _____									
18c. Signature of Alternate Facility (or Generator) Month Day Year									
18d. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. _____			2. _____			3. _____			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a									
Printed/Typed Name ANDREW ACKERMAN				Signature <i>[Signature]</i>		Month Day Year 10/13/11			

Please print or type. (Form designed for use on 8 1/2 x 11 (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number		
		2010300074	1	800 842 8792	008433182 JJK		
5. Generator's Name and Mailing Address		Alt. Doyle Wilson		Generator's Site Address (if different than mailing address)			
IL EPA 1021 North Grand Avenue East Springfield IL 62702 Generator's Phone: 217 762-7592				IL EPA 2612 11th Street Rockford IL 61109			
6. Transporter 1 Company Name				U.S. EPA ID Number			
Advanced Waste Carriers, Inc.				W10000815391			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address				U.S. EPA ID Number			
Advanced Waste Services - Chertworks 3801L West McKinley Ave Milwaukee WI 53208 Facility's Phone: 414 342 1852				W10000136572			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No. Type				
	1. Non-RCRA regulated, Non-DOT hazardous liquid material		001 TT		6000	G	NONE
	2.						
	3.						
4.							
14. Special Handling Instructions and Additional Information							
1) 41449115-X-B-2 VOC Contaminated Groundwater TRAILER 522							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Signature Month Day Year							
Troy M. FINE AGENT FOR JICA 16/14/11							
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Signature Month Day Year							
ORLANDO CARROLL 16/14/11							
Transporter 2 Printed/Typed Name Signature Month Day Year							
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
(1)							
Manifest Reference Number: U.S. EPA ID Number							
18b. Alternate Facility (or Generator) Facility's Phone: U.S. EPA ID Number							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name Signature Month Day Year							
E. L. H. S. 16/14/11							

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 2010300074	2. Page 1 of 1	3. Emergency Response Phone 900 942 9792	4. Manifest Tracking Number 008433180 JJK	
5. Generator's Name and Mailing Address IL EPA 1021 North Grand Avenue East Springfield IL 62702		Generator's Site Address (if different than mailing address) IL EPA 2813 11th Street Rockford IL 61109				
Generator's Phone: 217 782-7542						
6. Transporter 1 Company Name Advanced Waste Carriers, Inc.					U.S. EPA ID Number WI0000815391	
7. Transporter 2 Company Name					U.S. EPA ID Number	
8. Designated Facility Name and Site Address Advanced Waste Services - Chemworks 3001L West McKinley Ave Milwaukee WI 53208					U.S. EPA ID Number WI0000130572	
Facility's Phone: 414 342 1852						
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type	11. Total Quantity	12. Unit Wt/Vol.
		1. Non-RCRA regulated, Non-DOT hazardous liquid material		001 TT	3300	G
		2.				
		3.				
		4.				
13. Waste Codes NONE						
14. Special Handling Instructions and Additional Information 1) 91449115-X-B-2 VOC Contaminated Groundwater						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Tracy McPate AGENT FOR JIPA				Signature <i>[Signature]</i>		Month Day Year 16/14/11
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Part of entry/exit: _____ Date leaving U.S.: _____					
	Transporter signature (for exports only): _____					
	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name Denny Hillier		Signature <i>[Signature]</i>		Month Day Year 16/14/11	
	Transporter 2 Printed/Typed Name		Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	2					
	Manifest Reference Number: _____					
	18b. Alternate Facility (or Generator) U.S. EPA ID Number					
Facility's Phone: _____						
19a. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name Mark K. K...				Signature <i>[Signature]</i>		Month Day Year 10/6/11

Appendix C

Photolog

Appendix D

Water Well Sealing Forms

Rockford, Illinois



TESTING SERVICE CORPORATION

April 21, 2011

Local Office:

2235 23rd Avenue, Rockford, IL 61104-7334
815.394.2562 • Fax 815.394.2566

Mr. Troy McFate
Bodine Environmental Services
5350 East Firehouse Road
Decatur, Illinois 62521

Re: L-76,574
Well Abandonments
SE Rockford Superfund Site, Source Area 7, Contract No. HWA-8308
Eckberg Pine Manor Park and Eckberg Property
3750 Balsam Lane
Rockford, Illinois

Dear Mr. McFate:

Attached please find copies of the Water Well Sealing Forms for the seven (7) well abandonments performed on April 1, 2011 by Testing Service Corporation (TSC) personnel for the SE Rockford Superfund Site Area 7 at Eckberg Pine Manor Park and the Eckberg Property, located at 3750 Balsam Lane in Rockford, Illinois. The seven (7) wells and monitoring points abandoned were identified as follows: Monitoring Well-2 (MW-2); Monitoring Well-3 (MW-3); Soil Vapor Extraction Well-1 (SVE-1); Dual Phase Extraction Well-2 (DPE-2); Piezometer-2 (PZ-2); Vapor Monitoring Point-1 (VMP-1); and, Vapor Monitoring Point-2 (VMP-2). As requested, each of the seven (7) wells/monitoring points were disinfected. The protective casings and PVC pipes were removed to a depth of 2 feet, and bentonite was used to fill each well/monitoring point.

It has been a pleasure to assist you with this work. Please call if there are any questions or if we may be of further service.

Respectfully Submitted,

TESTING SERVICE CORPORATION

Jeffrey L. Martin, P.E.
Rockford Branch Manager

Enc: Water Well Sealing Forms (7)

cc: Winnebago County Health Department
Attn: Ms. Jackie Hatfield, B.S., L.E.H.P., via e-mail: jhatfield@wchd.org
401 Division Street; Rockford, IL 61110



WATER WELL SEALING FORM

PDF FILLABLE/SAVABLE

RETURN ALL COPIES TO IDPH OR
LOCAL HEALTH DEPARTMENT

This form shall be submitted to this Department or the local health department not more than 30 days after a water well, boring or monitoring well is sealed. Such wells are to be sealed not more than 30 days after they are abandoned in accordance with the sealing requirements in the Illinois Water Well Construction Code. THE LOCAL HEALTH DEPARTMENT OR REGIONAL PUBLIC HEALTH DEPARTMENT MUST BE NOTIFIED AT LEAST 48 HOURS PRIOR TO SEALING.

1. Ownership (Name of Controlling Party)
2. Well Location: Well Site Address City Zip
- Lot # Land I.D.# County Township
- Range Section Quarter of the Quarter of the Quarter
- GPS: North Degrees Minutes Seconds West Degrees Minutes Seconds
- Report decimal minutes to minutes and seconds by multiplying the decimal part of the minutes by 60, e.g. latitude 38 degrees 46.07 minutes N would be latitude 38 degrees 46 minutes 4.2 seconds (0.07 x 60 = 4.2) N. Report GPS coordinates to the nearest 0.1 second.
3. Year Drilled 4. Drilling Permit Number (and date, if known)
5. Type of Well 6. Total Depth (ft.) Diameter (in.)
7. Formation clear of obstruction
8. Details of Plugging (bentonite, neat cement or other materials)
- | | | | | | |
|--------------|---|------------|----------------------------------|----------|---------------------------------|
| Filled with | <input bentonite="" chips"="" type="text" value="3/8"/> | From (ft.) | <input type="text" value="-15"/> | to (ft.) | <input type="text" value="-2"/> |
| Kind of plug | <input type="text" value="Bentonite"/> | From (ft.) | <input type="text" value="-15"/> | to (ft.) | <input type="text" value="-2"/> |
| Filled with | <input type="text"/> | From (ft.) | <input type="text"/> | to (ft.) | <input type="text"/> |
| Kind of plug | <input type="text"/> | From (ft.) | <input type="text"/> | to (ft.) | <input type="text"/> |
| Filled with | <input type="text"/> | From (ft.) | <input type="text"/> | to (ft.) | <input type="text"/> |
| Kind of plug | <input type="text"/> | From (ft.) | <input type="text"/> | to (ft.) | <input type="text"/> |
9. CASING RECORD Upper 2 feet of casing removed 10. Date well was sealed
11. Licensed water well driller or other person approved by the Department performing well sealing

Name Complete License Number

Address City State Zip Code

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act-0863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center. IL 482-0831- Revised 5/09

Questions regarding the completion of this form should be directed to the local health department or the Illinois Department of Public Health 217-782-5830, TTY (for hearing impaired only) 800-547-0466.

Print Form

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 W. JEFFERSON ST.
SPRINGFIELD, IL 62761



WATER WELL SEALING FORM

PDF FILLABLE/SAVABLE

RETURN ALL COPIES TO IDPH OR
LOCAL HEALTH DEPARTMENT

This form shall be submitted to this Department or the local health department not more than 30 days after a water well, boring or monitoring well is sealed. Such wells are to be sealed not more than 30 days after they are abandoned in accordance with the sealing requirements in the Illinois Water Well Construction Code. THE LOCAL HEALTH DEPARTMENT OR REGIONAL PUBLIC HEALTH DEPARTMENT MUST BE NOTIFIED AT LEAST 48 HOURS PRIOR TO SEALING.

1. Ownership (Name of Controlling Party)
2. Well Location: Well Site Address City Zip
- Lot # Land I.D.# County Township
- Range Section Quarter of the Quarter of the Quarter

GPS: North Degrees Minutes Seconds West Degrees Minutes Seconds

Report decimal minutes to minutes and seconds by multiplying the decimal part of the minutes by 60, e.g. latitude 38 degrees 46.07 minutes N would be latitude 38 degrees 46 minutes 4.2 seconds (0.07 x 60 = 4.2) N. Report GPS coordinates to the nearest 0.1 second.

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7. Formation clear of obstruction
8. Details of Plugging (bentonite, neat cement or other materials)

Filled with	<input bentonite="" chips"="" type="text" value="3/8"/>	From (ft.)	<input type="text" value="-29"/>	to (ft.)	<input type="text" value="-2"/>
Kind of plug	<input type="text" value="Bentonite"/>	From (ft.)	<input type="text" value="-29"/>	to (ft.)	<input type="text" value="-2"/>
Filled with	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Kind of plug	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Filled with	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Kind of plug	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>

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1. Ownership (Name of Controlling Party)
2. Well Location: Well Site Address City Zip
- Lot # Land I.D.# County Township
- Range Section Quarter of the Quarter of the Quarter

GPS: North Degrees Minutes Seconds West Degrees Minutes Seconds

Report decimal minutes to minutes and seconds by multiplying the decimal part of the minutes by 60, e.g. latitude 38 degrees 46.07 minutes N would be latitude 38 degrees 46 minutes 4.2 seconds (0.07 x 60 = 4.2) N. Report GPS coordinates to the nearest 0.1 second.

3. Year Drilled 4. Drilling Permit Number (and date, if known)
5. Type of Well 6. Total Depth (ft.) Diameter (in.)
7. Formation clear of obstruction
8. Details of Plugging (bentonite, neat cement or other materials)

Filled with	<input bentonite="" chips"="" type="text" value="3/8"/>	From (ft.)	<input type="text" value="-29"/>	to (ft.)	<input type="text" value="-2"/>
Kind of plug	<input type="text" value="Bentonite"/>	From (ft.)	<input type="text" value="-29"/>	to (ft.)	<input type="text" value="-2"/>
Filled with	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Kind of plug	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Filled with	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Kind of plug	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>

9. CASING RECORD Upper 2 feet of casing removed 10. Date well was sealed
11. Licensed water well driller or other person approved by the Department performing well sealing

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Address City State Zip Code

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Questions regarding the completion of this form should be directed to the local health department or the Illinois Department of Public Health 217-782-5830, TTY (for hearing impaired only) 800-547-0466.

Pre-Final Inspection Checklist
Source Area 7 Remedial Action, Limited Soil Removal
Southeast Rockford Groundwater Contamination Superfund Site

Date: November 21, 2011

Present: Doyle Wilson, Illinois EPA
Troy McFate, Bodine
John Grabs, CDM
Brandon Celaya, CDM

Weather: Sunny, breezy, temperatures in the upper 30s

Item	Complete?	Comments
Pavement/asphalt condition at Alpine Road approach	Yes	None
Gravel road condition	Yes	Road currently in good condition
Silt/chain link fencing removed	Yes	None
Park grass established	No	Partially established; will likely need additional seeding in the Spring
Park trees established	No	See other observations
Ekberg property vegetation established	Yes	None
Vegetation – other issues	No	Rut near southern replacement tree may need to filled in the Spring
Construction debris removed	Yes	None
Excavation backfill stable (settling or subsidence)	Yes	None
Power pole stable	Yes	None
Other Observations		
<ul style="list-style-type: none"> Trees planted while dormant and will need to be monitored over the next year. All guy wires on trees cut, landscaping contractor to replace 		

Appendix I

Pre-Final Checklist

Detection Summary

Client: Bodine Environmental Services
Project/Site: Rockford

TestAmerica Job ID: 500-33637-1

Client Sample ID: A7-TOPSOIL-SLABAUGH

Lab Sample ID: 500-33637-1

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Fluoranthene	0.0081	J	0.038	0.0072	mg/Kg	1	☼	8270C	Total/NA
Heptachlor epoxide	0.0031	J	0.0097	0.0016	mg/Kg	5	☼	8081A	Total/NA
4,4'-DDE	0.022		0.0097	0.0024	mg/Kg	5	☼	8081A	Total/NA
4,4'-DDD	0.0059	J	0.0097	0.0018	mg/Kg	5	☼	8081A	Total/NA
4,4'-DDT	0.0060	J	0.0097	0.0018	mg/Kg	5	☼	8081A	Total/NA
Aluminum	11000		23	1.6	mg/Kg	1	☼	6010B	Total/NA
Antimony	0.61	J B	2.3	0.27	mg/Kg	1	☼	6010B	Total/NA
Arsenic	4.7		1.2	0.16	mg/Kg	1	☼	6010B	Total/NA
Barium	150		1.2	0.065	mg/Kg	1	☼	6010B	Total/NA
Beryllium	0.54		0.46	0.023	mg/Kg	1	☼	6010B	Total/NA
Cadmium	0.20	J B	0.23	0.031	mg/Kg	1	☼	6010B	Total/NA
Calcium	8000	B	23	3.7	mg/Kg	1	☼	6010B	Total/NA
Chromium	14		1.2	0.098	mg/Kg	1	☼	6010B	Total/NA
Cobalt	11		0.58	0.046	mg/Kg	1	☼	6010B	Total/NA
Copper	10		1.2	0.16	mg/Kg	1	☼	6010B	Total/NA
Iron	14000		23	3.0	mg/Kg	1	☼	6010B	Total/NA
Lead	13		0.58	0.28	mg/Kg	1	☼	6010B	Total/NA
Magnesium	5100		12	2.1	mg/Kg	1	☼	6010B	Total/NA
Manganese	1000		1.2	0.048	mg/Kg	1	☼	6010B	Total/NA
Nickel	13		1.2	0.076	mg/Kg	1	☼	6010B	Total/NA
Potassium	880		58	3.5	mg/Kg	1	☼	6010B	Total/NA
Selenium	1.1	J B	1.2	0.32	mg/Kg	1	☼	6010B	Total/NA
Sodium	86	J B	120	5.9	mg/Kg	1	☼	6010B	Total/NA
Vanadium	27		0.58	0.055	mg/Kg	1	☼	6010B	Total/NA
Zinc	41		2.3	0.18	mg/Kg	1	☼	6010B	Total/NA
Mercury	0.016	J	0.017	0.0018	mg/Kg	1	☼	7471A	Total/NA
pH	7.59		0.200	0.200	SU	1		9045C	Total/NA
Analyte	Result	Qualifier	RL	RL	Unit	Dil Fac	D	Method	Prep Type
Organic Matter at 440 Deg(C)	2.5		0.10	0.10	%	1		D2974-87	Total/NA
FOC by Nelson and Sommers (0.58 factor)	1.5		0.058	0.058	%	1		D2974-87	Total/NA

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50072-04

Quality Aggregates of Illinois, LLC

Gradation Summary Report 2010

0-95' Ledge

3" X 1" Clean

Sieve Size →	6"	5"	4"	3"	2 1/2"	2"	1 1/2"	1"	3/4"	1/2"	#4	# 200
Dist 1 Fine CM-18	94-100		80-100			30-80					10-50	0-10
Dist 1 Coarse CM-18	94-100		80-100			20-70						0-10
CA-1 spec				100	90-100	45-75	0-30	0-6				
R R #1 spec				100			30-76		----	----	0-16	
R R #2 spec			100			30-76			----	----	0-16	

Sample Date

Percent Passing

6/1/10

100.0

100.0

96.1

75.3

51.6

14.2

2.4

1.8

1.2

7/20/10

100.0

86.3

80.9

46.5

17.0

3.1

2.3

1.7

1.3

Averages**100.0****93.2****88.5****60.9****34.3****8.7****2.4****1.8****1.3**

50072-04		Quality Aggregates of Illinois, LLC									
022CM0701		Gradation Summary Report 2010								Off-Belt	
IDOT Approved		CA-7 Concrete Stone								% M	
Ledge #1 (0-29m)											
Sieve Size →	1 1/2"	1"	3/4"	5/8"	1/2"	3/8"	#4	#16	#200		
CA-7 Spec →	100	90-100	----	----	30-60	----	0-10		0-2.5		
CA-11 Spec →		100	84-100	----	30-60	----	0-12	0-6	0-2.5		
Master Band	→ 32-48									ASHTO T-11	
Sample Date			Results % Passing								Wash Test
7/12 SP	100.0	100.0	74.0	56.3	41.8	29.6	10.2	4.8	2.6	2.5%	2.41%
7/14 BE	100.0	100.0	73.3	53.5	38.1	25.1	6.1	3.9	2.6	2.8%	2.42%
7/14 SP	100.0	100.0	76.3	59.3	44.5	30.0	10.0	4.8	3.0	3.0%	2.68%
7/16 BE	100.0	100.0	75.2	56.5	39.8	26.7	6.0	3.0	1.9	2.4%	1.76%
7/30 Split/IDOT/SM	100.0	100.0	71.0	53.9	37.7	25.8	8.5	3.8	2.4	2.4%	2.29%
8/10 BE	100.0	99.6	73.0	55.5	42.3	29.0	6.0	2.9	2.0	2.5%	1.83%
8/12 SP	100.0	99.6	77.2	81.0	43.1	30.9	9.0	4.5	2.7	3.2%	2.50%
8/16 BE	100.0	99.6	72.2	53.6	37.7	24.8	4.9	2.9	2.0	2.9%	1.86%
8/23 BE	100.0	99.2	72.0	53.4	38.2	23.4	5.1	3.1	2.1	2.7%	1.93%
8/26 SP	100.0	99.5	73.5	54.6	36.6	23.7	5.7	3.8	2.3	2.2%	2.11%
9/7 BE Split/IDOT	100.0	100.0	72.5	53.4	39.2	27.1	4.6	2.3	1.6	1.9%	1.46%
9/9 SP	100.0	100.0	76.7	56.8	40.0	24.5	5.3	3.0	1.9	2.4%	1.74%
9/13 BE	100.0	100.0	71.8	57.8	43.6	24.9	6.2	3.0	1.8	2.7%	1.65%
9/17 SP	100.0	100.0	71.2	54.9	39.5	25.6	5.9	3.0	1.8	2.3%	1.70%
9/21 BE	100.0	100.0	72.1	58.0	40.2	27.3	6.8	3.8	2.6	2.7%	2.54%
9/23 BE Re-Sample	100.0	99.2	89.5	51.4	35.6	23.1	5.8	3.8	2.2	2.7%	2.02%
9/27 SP	100.0	100.0	72.3	55.8	39.8	28.0	7.5	4.1	2.4	2.5%	2.26%
Averages	100.0	99.8	74.3	56.8	39.9	26.4	6.7	3.6	2.2	2.6%	
Std. Deviation	0.0	0.3	4.3	6.6	2.5	2.4	1.7	0.7	0.4		

Scatter plot showing the relationship between the percentage of material passing through various sieve sizes (X-axis, 0.0% to 3.5%) and the percentage of material retained (Y-axis, 0.00% to 3.00%). The data points, labeled 'Series1', show a general upward trend, indicating that as the sieve size increases, the percentage of material passing also increases. The data points are clustered between 2.0% and 3.5% on the X-axis and 1.50% and 2.50% on the Y-axis.

Illinois EPA, Granular Material Submittal
Source Area 7 Limited Excavation
Southeast Rockford Groundwater Contamination NPL Site

Bodine Project #121435-11
April 2011

Attachment A

CA-7 Gradation Report



Environmental Consulting & Contracting

Waste Management
24-hour Service
Site Remediation
Environmental Audits

Tank Removal/Cleaning
Air Monitoring
Spill Response
RCRA Closures

April 5, 2011

Mr. John Grabs, P.G.
Camp Dresser & McKee, Inc.
125 S. Wacker Drive, Ste. 600
Chicago, Illinois 60606

RE: Granular Material
Submittal - 02230-1.03-A-B

2010300074 – Winnebago County
SE Rockford Site Area #7/Rockford
Superfund/Fiscal

Dear Mr. Grabs:

Bodine Environmental Services, Inc. (Bodine) is pleased to submit the Granular Material submittal for the above referenced project. Bodine proposes to backfill the excavation to one foot below ground surface (bgs) with CA-7 crushed gravel from Quality Aggregates of Illinois. The gradation summary sheet for the CA-7 gravel from Quality Aggregates of Illinois is included as Attachment A. Bodine will then backfill the excavation with FA-1 or FA-2 natural sand to six (6) inches bgs. After completing placement of the sand material, Bodine will place six (6) inches of topsoil on the sand material to complete backfilling activities. Bodine will supply the analytical results on the topsoil at a later date.

Quality Aggregates is a rock quarry at 2758 Wheeler Road in Cherry Valley, Illinois. The site contact is Dan Fischer and his phone number is 815-509-4844.

If there should be any questions, please do not hesitate to contact the undersigned project manager at 217-519-3955.

Respectfully submitted,
BODINE ENVIRONMENTAL SERVICES, INC.

Troy M. McFate
Senior Project Manager

Bob Bryson
Vice President of Operations

Attachments: SE Rockford Groundwater Contamination Superfund Site, Source Area 7,
Granular Material Submittal - 1 Copy

Appendix H
Topsoil and Granular Material Source
Documentation and Analytical Laboratory
Results Reports

Detection Summary

Client: Bodine Environmental Services
Project/Site: Rockford

TestAmerica Job ID: 500-33410-1

Client Sample ID: A7-G 7.5-8.0

Lab Sample ID: 500-33410-1

Analyte	Result	Qualifier	RL	MDL	Unit	Dil	Fac	D	Method	Prep Type
1,1-Dichloroethene	110	J	200	60	ug/Kg	250		☼	8260B	Total/NA
1,1-Dichloroethane	970		200	39	ug/Kg	250		☼	8260B	Total/NA
cis-1,2-Dichloroethene	10000		200	60	ug/Kg	250		☼	8260B	Total/NA
1,1,1-Trichloroethane	15000		200	59	ug/Kg	250		☼	8260B	Total/NA
Benzene	550		51	22	ug/Kg	250		☼	8260B	Total/NA
Trichloroethene	250		51	20	ug/Kg	250		☼	8260B	Total/NA
1,1,2-Trichloroethane	120	J	200	88	ug/Kg	250		☼	8260B	Total/NA
Tetrachloroethene	2000		200	57	ug/Kg	250		☼	8260B	Total/NA
Isopropylbenzene	9900		400	68	ug/Kg	250		☼	8260B	Total/NA
sec-Butylbenzene	5500		200	40	ug/Kg	250		☼	8260B	Total/NA
p-Isopropyltoluene	4900		400	61	ug/Kg	250		☼	8260B	Total/NA
n-Butylbenzene	18000		200	38	ug/Kg	250		☼	8260B	Total/NA
Toluene - DL	63000		510	160	ug/Kg	2500		☼	8260B	Total/NA
Ethylbenzene - DL	64000		510	200	ug/Kg	2500		☼	8260B	Total/NA
m&p-Xylene - DL	280000		1000	460	ug/Kg	2500		☼	8260B	Total/NA
o-Xylene - DL	120000		510	100	ug/Kg	2500		☼	8260B	Total/NA
N-Propylbenzene - DL	81000		4000	430	ug/Kg	2500		☼	8260B	Total/NA
1,3,5-Trimethylbenzene - DL	210000		4000	610	ug/Kg	2500		☼	8260B	Total/NA
1,2,4-Trimethylbenzene - DL2	800000		16000	2000	ug/Kg	10000		☼	8260B	Total/NA



Detection Summary

Client: Bodine Environmental Services
Project/Site: Rockford

TestAmerica Job ID: 500-33288-1

Client Sample ID: A7-E10-10.5

Lab Sample ID: 500-33288-1

Analyte	Result	Qualifier	RL	MDL	Unit	Dil	Fac	D	Method	Prep Type
1,1-Dichloroethene	16000		1100	320	ug/Kg	1000		*	8260B	Total/NA
trans-1,2-Dichloroethene	2500		1100	370	ug/Kg	1000		*	8260B	Total/NA
1,1-Dichloroethane	6100		1100	200	ug/Kg	1000		*	8260B	Total/NA
Benzene	950		270	120	ug/Kg	1000		*	8260B	Total/NA
Trichloroethene	36000		270	110	ug/Kg	1000		*	8260B	Total/NA
Toluene	100000		270	85	ug/Kg	1000		*	8260B	Total/NA
Tetrachloroethene	9300		1100	300	ug/Kg	1000		*	8260B	Total/NA
Ethylbenzene	190000		270	100	ug/Kg	1000		*	8260B	Total/NA
Isopropylbenzene	28000		2100	360	ug/Kg	1000		*	8260B	Total/NA
sec-Butylbenzene	15000		1100	210	ug/Kg	1000		*	8260B	Total/NA
p-Isopropyltoluene	14000		2100	320	ug/Kg	1000		*	8260B	Total/NA
n-Butylbenzene	63000		1100	200	ug/Kg	1000		*	8260B	Total/NA
cis-1,2-Dichloroethene - DL	260000		11000	3200	ug/Kg	10000		*	8260B	Total/NA
1,1,1-Trichloroethane - DL	600000		11000	3100	ug/Kg	10000		*	8260B	Total/NA
m&p-Xylene - DL	770000		5300	2400	ug/Kg	10000		*	8260B	Total/NA
o-Xylene - DL	280000		2700	530	ug/Kg	10000		*	8260B	Total/NA
N-Propylbenzene - DL	340000		21000	2200	ug/Kg	10000		*	8260B	Total/NA
1,3,5-Trimethylbenzene - DL	550000		21000	3200	ug/Kg	10000		*	8260B	Total/NA
1,2,4-Trimethylbenzene - DL2	2000000		43000	5300	ug/Kg	20000		*	8260B	Total/NA

Client Sample ID: A7-F10-10.5

Lab Sample ID: 500-33288-2

Analyte	Result	Qualifier	RL	MDL	Unit	Dil	Fac	D	Method	Prep Type
1,1-Dichloroethene	150		49	15	ug/Kg	50		*	8260B	Total/NA
trans-1,2-Dichloroethene	62		49	17	ug/Kg	50		*	8260B	Total/NA
1,1-Dichloroethane	360		49	9.4	ug/Kg	50		*	8260B	Total/NA
1,1,1-Trichloroethane	3900		49	14	ug/Kg	50		*	8260B	Total/NA
Benzene	52		12	5.5	ug/Kg	50		*	8260B	Total/NA
1,2-Dichloroethane	41	J	49	11	ug/Kg	50		*	8260B	Total/NA
Trichloroethene	430		12	4.9	ug/Kg	50		*	8260B	Total/NA
Toluene	2000		12	3.9	ug/Kg	50		*	8260B	Total/NA
1,1,2-Trichloroethane	30	J	49	22	ug/Kg	50		*	8260B	Total/NA
Tetrachloroethene	110		49	14	ug/Kg	50		*	8260B	Total/NA
Ethylbenzene	1500		12	4.8	ug/Kg	50		*	8260B	Total/NA
m&p-Xylene	4800		25	11	ug/Kg	50		*	8260B	Total/NA
o-Xylene	2000		12	2.5	ug/Kg	50		*	8260B	Total/NA
Isopropylbenzene	140		98	17	ug/Kg	50		*	8260B	Total/NA
N-Propylbenzene	1400		98	10	ug/Kg	50		*	8260B	Total/NA
1,3,5-Trimethylbenzene	2500		98	15	ug/Kg	50		*	8260B	Total/NA
p-Isopropyltoluene	61	J	98	15	ug/Kg	50		*	8260B	Total/NA
n-Butylbenzene	260		49	9.3	ug/Kg	50		*	8260B	Total/NA
cis-1,2-Dichloroethene - DL	11000		98	29	ug/Kg	100		*	8260B	Total/NA
1,2,4-Trimethylbenzene - DL	12000		200	25	ug/Kg	100		*	8260B	Total/NA

TestAmerica Chicago

Detection Summary

Client: Bodine Environmental Services
Project/Site: Rockford

TestAmerica Job ID: 500-32920-1
SDG: 500-32920-1

Client Sample ID: A7-C12-12.5

Lab Sample ID: 500-32920-1

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
1,1-Dichloroethene	82000		4800	1400	ug/Kg	5000	☼	8260B	Total/NA
trans-1,2-Dichloroethene	3800	J	4800	1700	ug/Kg	5000	☼	8260B	Total/NA
1,1-Dichloroethane	11000		4800	920	ug/Kg	5000	☼	8260B	Total/NA
cis-1,2-Dichloroethene	450000		4800	1400	ug/Kg	5000	☼	8260B	Total/NA
Toluene	83000		1200	390	ug/Kg	5000	☼	8260B	Total/NA
1,1,2-Trichloroethane	3900	J	4800	2100	ug/Kg	5000	☼	8260B	Total/NA
Tetrachloroethene	330000		4800	1400	ug/Kg	5000	☼	8260B	Total/NA
Ethylbenzene	68000		1200	470	ug/Kg	5000	☼	8260B	Total/NA
m&p-Xylene	280000		2400	1100	ug/Kg	5000	☼	8260B	Total/NA
o-Xylene	110000		1200	240	ug/Kg	5000	☼	8260B	Total/NA
Isopropylbenzene	28000		9600	1600	ug/Kg	5000	☼	8260B	Total/NA
N-Propylbenzene	110000		9600	1000	ug/Kg	5000	☼	8260B	Total/NA
1,3,5-Trimethylbenzene	160000		9600	1400	ug/Kg	5000	☼	8260B	Total/NA
1,2,4-Trimethylbenzene	620000		9600	1200	ug/Kg	5000	☼	8260B	Total/NA
sec-Butylbenzene	23000		4800	960	ug/Kg	5000	☼	8260B	Total/NA
p-Isopropyltoluene	22000		9600	1500	ug/Kg	5000	☼	8260B	Total/NA
n-Butylbenzene	53000		4800	910	ug/Kg	5000	☼	8260B	Total/NA
1,1,1-Trichloroethane - DL	2300000		48000	14000	ug/Kg	50000	☼	8260B	Total/NA
Trichloroethene - DL	1300000		12000	4800	ug/Kg	50000	☼	8260B	Total/NA

Client Sample ID: A7-D12-12.5

Lab Sample ID: 500-32920-2

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
trans-1,2-Dichloroethene	2600		45	15	ug/Kg	50	☼	8260B	Total/NA
1,1-Dichloroethane	2000		45	8.5	ug/Kg	50	☼	8260B	Total/NA
Benzene	99		11	5.0	ug/Kg	50	☼	8260B	Total/NA
Toluene	6600		11	3.6	ug/Kg	50	☼	8260B	Total/NA
Tetrachloroethene	3400		45	13	ug/Kg	50	☼	8260B	Total/NA
Ethylbenzene	8300		11	4.4	ug/Kg	50	☼	8260B	Total/NA
Isopropylbenzene	2800		89	15	ug/Kg	50	☼	8260B	Total/NA
1,1,2,2-Tetrachloroethane	4600		45	14	ug/Kg	50	☼	8260B	Total/NA
2-Chlorotoluene	6300		45	9.8	ug/Kg	50	☼	8260B	Total/NA
sec-Butylbenzene	2600		45	8.9	ug/Kg	50	☼	8260B	Total/NA
p-Isopropyltoluene	2800		89	14	ug/Kg	50	☼	8260B	Total/NA
n-Butylbenzene	6100		45	8.4	ug/Kg	50	☼	8260B	Total/NA
1,1-Dichloroethene - DL	7800		890	270	ug/Kg	1000	☼	8260B	Total/NA
cis-1,2-Dichloroethene - DL	120000		890	270	ug/Kg	1000	☼	8260B	Total/NA
Trichloroethene - DL	14000		220	88	ug/Kg	1000	☼	8260B	Total/NA
m&p-Xylene - DL	29000		450	200	ug/Kg	1000	☼	8260B	Total/NA
o-Xylene - DL	12000		220	45	ug/Kg	1000	☼	8260B	Total/NA
N-Propylbenzene - DL	11000		1800	190	ug/Kg	1000	☼	8260B	Total/NA
1,3,5-Trimethylbenzene - DL	18000		1800	270	ug/Kg	1000	☼	8260B	Total/NA
1,2,4-Trimethylbenzene - DL	70000		1800	220	ug/Kg	1000	☼	8260B	Total/NA
1,1,1-Trichloroethane - DL2	210000		4500	1300	ug/Kg	5000	☼	8260B	Total/NA

Detection Summary

Client: Bodine Environmental Services
Project/Site: Rockford

TestAmerica Job ID: 500-32710-1

Client Sample ID: A7-A12-12.5

Lab Sample ID: 500-32710-1

Analyte	Result	Qualifier	RL	MDL	Unit	Dil	Fac	D	Method	Prep Type
1,1-Dichloroethene	730		510	150	ug/Kg	500		*	8260B	Total/NA
trans-1,2-Dichloroethene	470	J	510	180	ug/Kg	500		*	8260B	Total/NA
1,1-Dichloroethane	1300		510	97	ug/Kg	500		*	8260B	Total/NA
cis-1,2-Dichloroethene	36000		510	150	ug/Kg	500		*	8260B	Total/NA
Benzene	81	J	130	57	ug/Kg	500		*	8260B	Total/NA
Toluene	12000		130	41	ug/Kg	500		*	8260B	Total/NA
Tetrachloroethene	480	J	510	140	ug/Kg	500		*	8260B	Total/NA
Ethylbenzene	15000		130	50	ug/Kg	500		*	8260B	Total/NA
m&p-Xylene	64000		260	120	ug/Kg	500		*	8260B	Total/NA
o-Xylene	28000		130	26	ug/Kg	500		*	8260B	Total/NA
Isopropylbenzene	7200		1000	170	ug/Kg	500		*	8260B	Total/NA
N-Propylbenzene	24000		1000	110	ug/Kg	500		*	8260B	Total/NA
1,3,5-Trimethylbenzene	40000		1000	150	ug/Kg	500		*	8260B	Total/NA
tert-Butylbenzene	550		510	120	ug/Kg	500		*	8260B	Total/NA
sec-Butylbenzene	6000		510	100	ug/Kg	500		*	8260B	Total/NA
p-Isopropyltoluene	6700		1000	150	ug/Kg	500		*	8260B	Total/NA
n-Butylbenzene	14000		510	96	ug/Kg	500		*	8260B	Total/NA
1,1,1-Trichloroethane - DL	200000		1000	300	ug/Kg	1000		*	8260B	Total/NA
1,2,4-Trimethylbenzene - DL	140000		2000	260	ug/Kg	1000		*	8260B	Total/NA

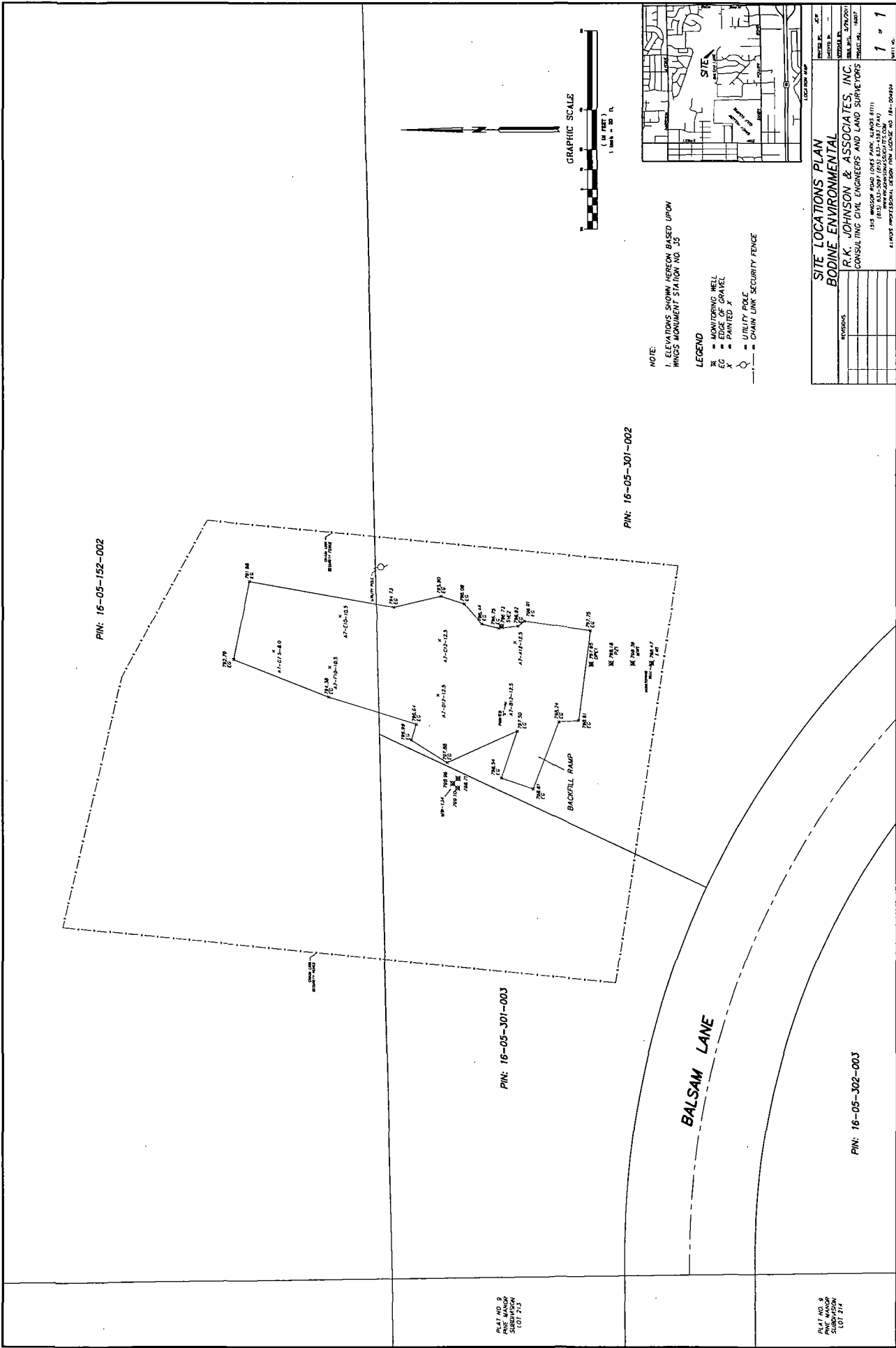
Client Sample ID: A7-B12-12.5

Lab Sample ID: 500-32710-2

Analyte	Result	Qualifier	RL	MDL	Unit	Dil	Fac	D	Method	Prep Type
1,1-Dichloroethene	6700		810	240	ug/Kg	1000		*	8260B	Total/NA
trans-1,2-Dichloroethene	1900		810	280	ug/Kg	1000		*	8260B	Total/NA
1,1-Dichloroethane	2200		810	150	ug/Kg	1000		*	8260B	Total/NA
cis-1,2-Dichloroethene	100000		810	240	ug/Kg	1000		*	8260B	Total/NA
Trichloroethene	500		200	80	ug/Kg	1000		*	8260B	Total/NA
Toluene	11000		200	65	ug/Kg	1000		*	8260B	Total/NA
Tetrachloroethene	740	J	810	230	ug/Kg	1000		*	8260B	Total/NA
Ethylbenzene	13000		200	79	ug/Kg	1000		*	8260B	Total/NA
m&p-Xylene	65000		400	180	ug/Kg	1000		*	8260B	Total/NA
o-Xylene	23000		200	40	ug/Kg	1000		*	8260B	Total/NA
Isopropylbenzene	5500		1600	270	ug/Kg	1000		*	8260B	Total/NA
N-Propylbenzene	20000		1600	170	ug/Kg	1000		*	8260B	Total/NA
1,3,5-Trimethylbenzene	31000		1600	240	ug/Kg	1000		*	8260B	Total/NA
1,2,4-Trimethylbenzene	110000		1600	200	ug/Kg	1000		*	8260B	Total/NA
sec-Butylbenzene	4400		810	160	ug/Kg	1000		*	8260B	Total/NA
p-Isopropyltoluene	4200		1600	240	ug/Kg	1000		*	8260B	Total/NA
n-Butylbenzene	10000		810	150	ug/Kg	1000		*	8260B	Total/NA
1,1,1-Trichloroethane - DL	230000		1600	470	ug/Kg	2000		*	8260B	Total/NA

Appendix G

Soil Sample Analytical Reports



PIN: 16-05-152-002

PIN: 16-05-301-002

PIN: 16-05-301-003

PIN: 16-05-302-003

PLAT NO. 9
 PINE MANOR
 SUBDIVISION
 LOT 213

PLAT NO. 9
 PINE MANOR
 SUBDIVISION
 LOT 214

Appendix F

Final Extent of Excavation Survey



Client Project ID: Bodine Services 041511
Purchase Order: NA
Workorder: 1110579
Project Manager Rand Potter

General Lab Comments

The results provided in this report relate only to the items tested.
Samples were received in acceptable condition unless otherwise noted.
Samples have not been blank corrected unless otherwise noted.
This test report shall not be reproduced, except in full, without written approval of ALS.

ALS is accredited by ANSI/ACCLASS (ISO 17025:2005) for specific fields of testing as documented in its current scope of accreditation (ID#AT-1421) which is available on request by contacting your project manager or view on the internet at <http://www.aiclasscorp.com>. The quality systems implemented in the laboratory apply to all technologies performed by ALS.

ALS provides professional analytical services for all samples submitted. ALS is not in a position to interpret the data and assumes no responsibility for the quality of the samples submitted.

All quality control samples processed with the samples in this report yielded acceptable results unless otherwise noted.

Definitions

LOD = Limit of Detection = MDL = Method Detection Limit, A statistical estimate of method/media/instrument sensitivity.

LOQ = Limit of Quantitation = RL = Reporting Limit, A verified value of method/media/instrument sensitivity.

ND = Not Detected, Testing result not detected above the LOD or LOQ.

** No result could be reported, see sample comments for details.

< This testing result is less than the numerical value.

() This testing result is between the LOD and LOQ and has higher analytical uncertainty than values at or above the LOQ.



Client Project ID: Bodine Services 041511

Purchase Order: NA

Workorder: 1110579

Project Manager Rand Potter

Analytical Results

Sample ID: 3384107277	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/13/2011
Lab ID: 1110579006	Sampling Location: IEPA S.E. Rockford A	Received: 04/14/2011

Method: Solvent Panel Scan		Sampling Parameter: Air Volume Not Applicable		Analyzed: 04/20/2011
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)
n-Propyl acetate	<0.50	NA	NA	0.50
Methyl isobutyl ketone	<0.50	NA	NA	0.50
Toluene	<0.50	NA	NA	0.50
1,1,2-Trichloroethane	<0.50	NA	NA	0.50
n-Octane	<0.50	NA	NA	0.50
Tetrachloroethene	<0.50	NA	NA	0.50
n-Butyl acetate	<0.50	NA	NA	0.50
Chlorobenzene	<0.50	NA	NA	0.50
Ethyl benzene	<0.50	NA	NA	0.50
Xylene	<1.5	NA	NA	1.5
Styrene	<0.50	NA	NA	0.50
2-Ethoxyethanol acetate	<0.50	NA	NA	0.50
Cumene	<0.50	NA	NA	0.50
Methylstyrene	<0.50	NA	NA	0.50
1,3-Dichlorobenzene	<0.50	NA	NA	0.50
1,4-Dichlorobenzene	<0.50	NA	NA	0.50
1,2-Dichlorobenzene	<2.0	NA	NA	2.0
Naphthalene	<0.50	NA	NA	0.50

Report Authorization

Method: Solvent Panel Scan	
Guy Barker Analyst	Reed A. Hendricks Peer Review

Laboratory Contact Information

Phone: (801) 266-7700
Email: alslt.lab@alsglobal.com
Web: www.datachem.com

ALS Laboratory Group (formerly DataChem Laboratories, Inc.)
960 W Levoy Drive
Salt Lake City, Utah 84123



Client Project ID: Bodine Services 041511

Purchase Order: NA

Workorder: 1110579

Project Manager Rand Potter

Analytical Results

Sample ID: 3384107280	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/13/2011
Lab ID: 1110579005	Sampling Location: IEPA S.E. Rockford A	Received: 04/14/2011

Method: Solvent Panel Scan		Sampling Parameter: Air Volume Not Applicable		Analyzed: 04/20/2011	
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)	
1,1,2-Trichloroethane	<0.50	NA	NA	0.50	
n-Octane	<0.50	NA	NA	0.50	
Tetrachloroethene	<0.50	NA	NA	0.50	
n-Butyl acetate	<0.50	NA	NA	0.50	
Chlorobenzene	<0.50	NA	NA	0.50	
Ethyl benzene	<0.50	NA	NA	0.50	
Xylene	<1.5	NA	NA	1.5	
Styrene	<0.50	NA	NA	0.50	
2-Ethoxyethanol acetate	<0.50	NA	NA	0.50	
Cumene	<0.50	NA	NA	0.50	
Methylstyrene	<0.50	NA	NA	0.50	
1,3-Dichlorobenzene	<0.50	NA	NA	0.50	
1,4-Dichlorobenzene	<0.50	NA	NA	0.50	
1,2-Dichlorobenzene	<2.0	NA	NA	2.0	
Naphthalene	<0.50	NA	NA	0.50	

Sample ID: 3384107277	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/13/2011
Lab ID: 1110579006	Sampling Location: IEPA S.E. Rockford A	Received: 04/14/2011

Method: Solvent Panel Scan		Sampling Parameter: Air Volume Not Applicable		Analyzed: 04/20/2011	
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)	
Methyl ethyl ketone	<2.0	NA	NA	2.0	
n-Hexane	<0.50	NA	NA	0.50	
Tetrahydrofuran	<0.50	NA	NA	0.50	
Chloroform	<0.50	NA	NA	0.50	
1,1,1-Trichloroethane	<0.50	NA	NA	0.50	
1,2-Dichloroethane	<0.50	NA	NA	0.50	
Benzene	<0.50	NA	NA	0.50	
n-Butyl alcohol	<5.0	NA	NA	5.0	
Cyclohexane	<0.50	NA	NA	0.50	
Cyclohexene	<0.50	NA	NA	0.50	
2-Pentanone	<0.50	NA	NA	0.50	
Trichloroethene	<0.50	NA	NA	0.50	

Results Continued on Next Page

ANALYTICAL REPORT



Client Project ID: Bodine Services 041511
Purchase Order: NA
Workorder: 1110579
Project Manager Rand Potter

Analytical Results

Sample ID: 3384107284	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/13/2011
Lab ID: 1110579004	Sampling Location: IEPA S.E. Rockford A	Received: 04/14/2011

Method: Solvent Panel Scan		Sampling Parameter: Air Volume 7.623 L		Analyzed: 04/20/2011
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)
n-Butyl acetate	<0.50	<0.066	<0.014	0.50
Chlorobenzene	<0.50	<0.066	<0.014	0.50
Ethyl benzene	<0.50	<0.066	<0.015	0.50
Xylene	<1.5	<0.20	<0.045	1.5
Styrene	<0.50	<0.066	<0.015	0.50
2-Ethoxyethanol acetate	<0.50	<0.066	<0.012	0.50
Cumene	<0.50	<0.066	<0.013	0.50
Methylstyrene	<0.50	<0.066	<0.014	0.50
1,3-Dichlorobenzene	<0.50	<0.066	<0.011	0.50
1,4-Dichlorobenzene	<0.50	<0.066	<0.011	0.50
1,2-Dichlorobenzene	<2.0	<0.26	<0.044	2.0
Naphthalene	<0.50	<0.066	<0.013	0.50

Sample ID: 3384107280	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/13/2011
Lab ID: 1110579005	Sampling Location: IEPA S.E. Rockford A	Received: 04/14/2011

Method: Solvent Panel Scan		Sampling Parameter: Air Volume Not Applicable		Analyzed: 04/20/2011
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)
Methyl ethyl ketone	<2.0	NA	NA	2.0
n-Hexane	<0.50	NA	NA	0.50
Tetrahydrofuran	<0.50	NA	NA	0.50
Chloroform	<0.50	NA	NA	0.50
1,1,1-Trichloroethane	<0.50	NA	NA	0.50
1,2-Dichloroethane	<0.50	NA	NA	0.50
Benzene	<0.50	NA	NA	0.50
n-Butyl alcohol	<5.0	NA	NA	5.0
Cyclohexane	<0.50	NA	NA	0.50
Cyclohexene	<0.50	NA	NA	0.50
2-Pentanone	<0.50	NA	NA	0.50
Trichloroethene	<0.50	NA	NA	0.50
n-Propyl acetate	<0.50	NA	NA	0.50
Methyl isobutyl ketone	<0.50	NA	NA	0.50
Toluene	<0.50	NA	NA	0.50

Results Continued on Next Page



Client Project ID: Bodine Services 041511

Purchase Order: NA

Workorder: 1110579

Project Manager Rand Potter

Analytical Results

Sample ID: 3384107285	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/13/2011 Received: 04/14/2011
Lab ID: 1110579003	Sampling Location: IEPA S.E. Rockford A	

Method: Solvent Panel Scan		Sampling Parameter: Air Volume 9.412 L		Analyzed: 04/20/2011
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)
Xylene	<1.5	<0.16	<0.037	1.5
Styrene	<0.50	<0.053	<0.013	0.50
2-Ethoxyethanol acetate	<0.50	<0.053	<0.0098	0.50
Cumene	<0.50	<0.053	<0.011	0.50
Methylstyrene	<0.50	<0.053	<0.011	0.50
1,3-Dichlorobenzene	<0.50	<0.053	<0.0088	0.50
1,4-Dichlorobenzene	<0.50	<0.053	<0.0088	0.50
1,2-Dichlorobenzene	<2.0	<0.21	<0.035	2.0
Naphthalene	<0.50	<0.053	<0.010	0.50

Sample ID: 3384107284	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/13/2011 Received: 04/14/2011
Lab ID: 1110579004	Sampling Location: IEPA S.E. Rockford A	

Method: Solvent Panel Scan		Sampling Parameter: Air Volume 7.623 L		Analyzed: 04/20/2011
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)
Methyl ethyl ketone	<2.0	<0.26	<0.089	2.0
n-Hexane	<0.50	<0.066	<0.019	0.50
Tetrahydrofuran	<0.50	<0.066	<0.022	0.50
Chloroform	<0.50	<0.066	<0.013	0.50
1,1,1-Trichloroethane	5.1	0.67	0.12	0.50
1,2-Dichloroethane	<0.50	<0.066	<0.016	0.50
Benzene	<0.50	<0.066	<0.021	0.50
n-Butyl alcohol	<5.0	<0.66	<0.22	5.0
Cyclohexane	<0.50	<0.066	<0.019	0.50
Cyclohexene	<0.50	<0.066	<0.020	0.50
2-Pentanone	<0.50	<0.066	<0.019	0.50
Trichloroethene	<0.50	<0.066	<0.012	0.50
n-Propyl acetate	<0.50	<0.066	<0.016	0.50
Methyl isobutyl ketone	<0.50	<0.066	<0.016	0.50
Toluene	<0.50	<0.066	<0.017	0.50
1,1,2-Trichloroethane	<0.50	<0.066	<0.012	0.50
n-Octane	<0.50	<0.066	<0.014	0.50
Tetrachloroethene	<0.50	<0.066	<0.0097	0.50

Results Continued on Next Page



Client Project ID: Bodine Services 041511
Purchase Order: NA
Workorder: 1110579
Project Manager Rand Potter

Analytical Results

Sample ID: 3384107283	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/12/2011
Lab ID: 1110579002	Sampling Location: IEPA S.E. Rockford A	Received: 04/14/2011

Method: Solvent Panel Scan		Sampling Parameter: Air Volume 7.602 L		Analyzed: 04/20/2011
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)
Cumene	<0.50	<0.066	<0.013	0.50
Methylstyrene	<0.50	<0.066	<0.014	0.50
1,3-Dichlorobenzene	<0.50	<0.066	<0.011	0.50
1,4-Dichlorobenzene	<0.50	<0.066	<0.011	0.50
1,2-Dichlorobenzene	<2.0	<0.26	<0.044	2.0
Naphthalene	<0.50	<0.066	<0.013	0.50

Sample ID: 3384107285	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/13/2011
Lab ID: 1110579003	Sampling Location: IEPA S.E. Rockford A	Received: 04/14/2011

Method: Solvent Panel Scan		Sampling Parameter: Air Volume 9.412 L		Analyzed: 04/20/2011
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)
Methyl ethyl ketone	<2.0	<0.21	<0.072	2.0
n-Hexane	<0.50	<0.053	<0.015	0.50
Tetrahydrofuran	<0.50	<0.053	<0.018	0.50
Chloroform	<0.50	<0.053	<0.011	0.50
1,1,1-Trichloroethane	<0.50	<0.053	<0.0097	0.50
1,2-Dichloroethane	<0.50	<0.053	<0.013	0.50
Benzene	<0.50	<0.053	<0.017	0.50
n-Butyl alcohol	<5.0	<0.53	<0.18	5.0
Cyclohexane	<0.50	<0.053	<0.015	0.50
Cyclohexene	<0.50	<0.053	<0.016	0.50
2-Pentanone	<0.50	<0.053	<0.015	0.50
Trichloroethene	<0.50	<0.053	<0.0099	0.50
n-Propyl acetate	<0.50	<0.053	<0.013	0.50
Methyl isobutyl ketone	<0.50	<0.053	<0.013	0.50
Toluene	<0.50	<0.053	<0.014	0.50
1,1,2-Trichloroethane	<0.50	<0.053	<0.0097	0.50
n-Octane	<0.50	<0.053	<0.011	0.50
Tetrachloroethene	<0.50	<0.053	<0.0078	0.50
n-Butyl acetate	<0.50	<0.053	<0.011	0.50
Chlorobenzene	<0.50	<0.053	<0.012	0.50
Ethyl benzene	<0.50	<0.053	<0.012	0.50

Results Continued on Next Page



Client Project ID: Bodine Services 041511

Purchase Order: NA

Workorder: 1110579

Project Manager Rand Potter

Analytical Results

Sample ID: 3384107281	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/12/2011 Received: 04/14/2011
Lab ID: 1110579001	Sampling Location: IEPA S.E. Rockford A	

Method: Solvent Panel Scan		Sampling Parameter: Air Volume 9.464 L		Analyzed: 04/20/2011	
Analyte	ug/sample	mg/m³	ppm	RL (ug/sample)	
1,4-Dichlorobenzene	<0.50	<0.053	<0.0088	0.50	
1,2-Dichlorobenzene	<2.0	<0.21	<0.035	2.0	
Naphthalene	<0.50	<0.053	<0.010	0.50	

Sample ID: 3384107283	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/12/2011 Received: 04/14/2011
Lab ID: 1110579002	Sampling Location: IEPA S.E. Rockford A	

Method: Solvent Panel Scan	Sampling Parameter: Air Volume 7.602 L			Analyzed: 04/20/2011
Analyte	ug/sample	mg/m³	ppm	RL (ug/sample)
Methyl ethyl ketone	<2.0	<0.26	<0.089	2.0
n-Hexane	<0.50	<0.066	<0.019	0.50
Tetrahydrofuran	<0.50	<0.066	<0.022	0.50
Chloroform	<0.50	<0.066	<0.014	0.50
1,1,1-Trichloroethane	0.97	0.13	0.024	0.50
1,2-Dichloroethane	<0.50	<0.066	<0.016	0.50
Benzene	<0.50	<0.066	<0.021	0.50
n-Butyl alcohol	<5.0	<0.66	<0.22	5.0
Cyclohexane	<0.50	<0.066	<0.019	0.50
Cyclohexene	<0.50	<0.066	<0.020	0.50
2-Pentanone	<0.50	<0.066	<0.019	0.50
Trichloroethene	<0.50	<0.066	<0.012	0.50
n-Propyl acetate	<0.50	<0.066	<0.016	0.50
Methyl isobutyl ketone	<0.50	<0.066	<0.016	0.50
Toluene	<0.50	<0.066	<0.018	0.50
1,1,2-Trichloroethane	<0.50	<0.066	<0.012	0.50
n-Octane	<0.50	<0.066	<0.014	0.50
Tetrachloroethene	<0.50	<0.066	<0.0097	0.50
n-Butyl acetate	<0.50	<0.066	<0.014	0.50
Chlorobenzene	<0.50	<0.066	<0.014	0.50
Ethyl benzene	<0.50	<0.066	<0.015	0.50
Xylene	<1.5	<0.20	<0.045	1.5
Styrene	<0.50	<0.066	<0.015	0.50
2-Ethoxyethanol acetate	<0.50	<0.066	<0.012	0.50

Results Continued on Next Page



Report Date April 21, 2011

David Yates
Bodine Services
5350 E. Firehouse Road
Decatur, IL 62521

Phone: (217) 428-4380

E-mail: dyates@bodineservices.com

Client Project ID: Bodine Services 041511
Purchase Order: NA
Workorder: 1110579
Project Manager Rand Potter

Analytical Results

Sample ID: 3384107281	Media: SKC 226-01, Charcoal Tube 100/50mg	Collected: 04/12/2011
Lab ID: 1110579001	Sampling Location: IEPA S.E. Rockford A	Received: 04/14/2011

Method: Solvent Panel Scan		Sampling Parameter: Air Volume 9.464 L		Analyzed: 04/20/2011
Analyte	ug/sample	mg/m ³	ppm	RL (ug/sample)
Methyl ethyl ketone	<2.0	<0.21	<0.072	2.0
n-Hexane	<0.50	<0.053	<0.015	0.50
Tetrahydrofuran	<0.50	<0.053	<0.018	0.50
Chloroform	<0.50	<0.053	<0.011	0.50
1,1,1-Trichloroethane	<0.50	<0.053	<0.0097	0.50
1,2-Dichloroethane	<0.50	<0.053	<0.013	0.50
Benzene	<0.50	<0.053	<0.017	0.50
n-Butyl alcohol	<5.0	<0.53	<0.17	5.0
Cyclohexane	<0.50	<0.053	<0.015	0.50
Cyclohexene	<0.50	<0.053	<0.016	0.50
2-Pentanone	<0.50	<0.053	<0.015	0.50
Trichloroethene	<0.50	<0.053	<0.0098	0.50
n-Propyl acetate	<0.50	<0.053	<0.013	0.50
Methyl isobutyl ketone	<0.50	<0.053	<0.013	0.50
Toluene	<0.50	<0.053	<0.014	0.50
1,1,2-Trichloroethane	<0.50	<0.053	<0.0097	0.50
n-Octane	<0.50	<0.053	<0.011	0.50
Tetrachloroethene	<0.50	<0.053	<0.0078	0.50
n-Butyl acetate	<0.50	<0.053	<0.011	0.50
Chlorobenzene	<0.50	<0.053	<0.012	0.50
Ethyl benzene	<0.50	<0.053	<0.012	0.50
Xylene	<1.5	<0.16	<0.037	1.5
Styrene	<0.50	<0.053	<0.012	0.50
2-Ethoxyethanol acetate	<0.50	<0.053	<0.0098	0.50
Cumene	<0.50	<0.053	<0.011	0.50
Methylstyrene	<0.50	<0.053	<0.011	0.50
1,3-Dichlorobenzene	<0.50	<0.053	<0.0088	0.50

Results Continued on Next Page

Appendix E

Air Monitoring Analytical Laboratory Results Reports

Print Form

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 W. JEFFERSON ST.
SPRINGFIELD, IL 62761



WATER WELL SEALING FORM

PDF FILLABLE/SAVABLE

RETURN ALL COPIES TO IDPH OR
LOCAL HEALTH DEPARTMENT

This form shall be submitted to this Department or the local health department not more than 30 days after a water well boring or monitoring well is sealed. Such wells are to be sealed not more than 30 days after they are abandoned in accordance with the sealing requirements in the Illinois Water Well Construction Code. THE LOCAL HEALTH DEPARTMENT OR REGIONAL PUBLIC HEALTH DEPARTMENT MUST BE NOTIFIED AT LEAST 48 HOURS PRIOR TO SEALING.

1. Ownership (Name of Controlling Party)
2. Well Location: Well Site Address City Zip
- Lot # Land I.D.# County Township
- Range Section Quarter of the Quarter of the Quarter
- GPS: North Degrees Minutes Seconds West Degrees Minutes Seconds
- Report decimal minutes to minutes and seconds by multiplying the decimal part of the minutes by 60, e.g. latitude 38 degrees 46.07 minutes N would be latitude 38 degrees 46 minutes 4.2 seconds (0.07 x 60 = 4.2) N. Report GPS coordinates to the nearest 0.1 second.
3. Year Drilled 4. Drilling Permit Number (and date, if known)
5. Type of Well 6. Total Depth (ft.) Diameter (in.)
7. Formation clear of obstruction
8. Details of Plugging (bentonite, neat cement or other materials)
- | | | | | | |
|--------------|--|------------|----------------------------------|----------|---------------------------------|
| Filled with | <input type="text" value="BENSEAL"/> | From (ft.) | <input type="text" value="-10"/> | to (ft.) | <input type="text" value="-2"/> |
| Kind of plug | <input type="text" value="Bentonite"/> | From (ft.) | <input type="text" value="-10"/> | to (ft.) | <input type="text" value="-2"/> |
| Filled with | <input type="text"/> | From (ft.) | <input type="text"/> | to (ft.) | <input type="text"/> |
| Kind of plug | <input type="text"/> | From (ft.) | <input type="text"/> | to (ft.) | <input type="text"/> |
| Filled with | <input type="text"/> | From (ft.) | <input type="text"/> | to (ft.) | <input type="text"/> |
| Kind of plug | <input type="text"/> | From (ft.) | <input type="text"/> | to (ft.) | <input type="text"/> |
9. CASING RECORD Upper 2 feet of casing removed 10. Date well was sealed
11. Licensed water well driller or other person approved by the Department performing well sealing

Name Complete License Number

Address City State Zip Code

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act-0863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center. IL 482-0631- Revised 5/09

Questions regarding the completion of this form should be directed to the local health department or the Illinois Department of Public Health 217-782-5830, TTY (for hearing impaired only) 800-547-0466.

Print Form

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 W. JEFFERSON ST.
SPRINGFIELD, IL 62761



WATER WELL SEALING FORM

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1. Ownership (Name of Controlling Party)
2. Well Location: Well Site Address City Zip
- Lot # Land I.D.# County Township
- Range Section Quarter of the Quarter of the Quarter

GPS: North Degrees Minutes Seconds West Degrees Minutes Seconds

Report decimal minutes to minutes and seconds by multiplying the decimal part of the minutes by 60, e.g. latitude 38 degrees 46.07 minutes N would be latitude 38 degrees 46 minutes 4.2 seconds (0.07 x 60 = 4.2) N. Report GPS coordinates to the nearest 0.1 second.

3. Year Drilled 4. Drilling Permit Number (and date, if known)
5. Type of Well 6. Total Depth (ft.) Diameter (in.)
7. Formation clear of obstruction
8. Details of Plugging (bentonite, neat cement or other materials)

Filled with	<input type="text" value="BENSEAL"/>	From (ft.)	<input type="text" value="-15"/>	to (ft.)	<input type="text" value="-2"/>
Kind of plug	<input type="text" value="Bentonite"/>	From (ft.)	<input type="text" value="-15"/>	to (ft.)	<input type="text" value="-2"/>
Filled with	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Kind of plug	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Filled with	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Kind of plug	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>

9. CASING RECORD Upper 2 feet of casing removed 10. Date well was sealed
11. Licensed water well driller or other person approved by the Department performing well sealing

Name Complete License Number

Address City State Zip Code

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act-0863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center. IL 482-0831- Revised 5/09

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Print Form

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 W. JEFFERSON ST.
SPRINGFIELD, IL 62761



WATER WELL SEALING FORM

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LOCAL HEALTH DEPARTMENT

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1. Ownership (Name of Controlling Party)		Illinois EPA	
2. Well Location: Well Site Address		3750 Balsam Ln, Eckberg Park	City Rockford Zip 61109
Lot #	Land I.D.#	16-05-301-002	County Winnebago Township 43
Range 2	Section 5	NW	Quarter of the SW Quarter of the SW Quarter
GPS: North Degrees 42 Minutes 13 Seconds 50.6 West Degrees 89 Minutes 2 Seconds 15.5			
Report decimal minutes to minutes and seconds by multiplying the decimal part of the minutes by 60, e.g. latitude 38 degrees 46.07 minutes N would be latitude 38 degrees 46 minutes 4.2 seconds (0.07 x 60 = 4.2) N. Report GPS coordinates to the nearest 0.1 second.			
3. Year Drilled 2006		4. Drilling Permit Number (and date, if known)	
5. Type of Well Monitoring		6. Total Depth (ft.) 30 Diameter (in.) 1	
7. Formation clear of obstruction Yes			
8. Details of Plugging (bentonite, neat cement or other materials)			
Filled with	3/8" Bentonite Chips	From (ft.) -30	to (ft.) -2
Kind of plug	Bentonite	From (ft.) -30	to (ft.) -2
Filled with		From (ft.)	to (ft.)
Kind of plug		From (ft.)	to (ft.)
Filled with		From (ft.)	to (ft.)
Kind of plug		From (ft.)	to (ft.)
9. CASING RECORD Upper 2 feet of casing removed Yes		10. Date well was sealed Apr 1, 2011	
11. Licensed water well driller or other person approved by the Department performing well sealing			
Name Darin Delaney		Complete License Number 092-008663	
Address 457 E. Gundersen Drive		City Carol Stream	State Illinois Zip Code 60188

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 0863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center. IL 482-0631- Revised 5/09

Questions regarding the completion of this form should be directed to the local health department or the Illinois Department of Public Health 217-782-5830, TTY (for hearing impaired only) 800-547-0466.

Print Form

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 W. JEFFERSON ST.
SPRINGFIELD, IL 62761



WATER WELL SEALING FORM

PDF FILLABLE/SAVABLE

RETURN ALL COPIES TO IDPH OR
LOCAL HEALTH DEPARTMENT

This form shall be submitted to this Department or the local health department not more than 30 days after a water well, boring or monitoring well is sealed. Such wells are to be sealed not more than 30 days after they are abandoned in accordance with the sealing requirements in the Illinois Water Well Construction Code. THE LOCAL HEALTH DEPARTMENT OR REGIONAL PUBLIC HEALTH DEPARTMENT MUST BE NOTIFIED AT LEAST 48 HOURS PRIOR TO SEALING.

1. Ownership (Name of Controlling Party)
2. Well Location: Well Site Address City Zip
- Lot # Land I.D.# County Township
- Range Section NW Quarter of the SW Quarter of the SW Quarter

GPS: North Degrees Minutes Seconds West Degrees Minutes Seconds

Report decimal minutes to minutes and seconds by multiplying the decimal part of the minutes by 60, e.g. latitude 38 degrees 46.07 minutes N would be latitude 38 degrees 46 minutes 4.2 seconds (0.07 x 60 = 4.2) N. Report GPS coordinates to the nearest 0.1 second.

3. Year Drilled 4. Drilling Permit Number (and date, if known)
5. Type of Well 6. Total Depth (ft.) Diameter (in.)
7. Formation clear of obstruction
8. Details of Plugging (bentonite, neat cement or other materials)

Filled with	<input bentonite="" chips"="" type="text" value="3/8"/>	From (ft.)	<input type="text" value="-28.5"/>	to (ft.)	<input type="text" value="-2"/>
Kind of plug	<input type="text" value="Bentonite"/>	From (ft.)	<input type="text" value="-28.5"/>	to (ft.)	<input type="text" value="-2"/>
Filled with	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Kind of plug	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Filled with	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>
Kind of plug	<input type="text"/>	From (ft.)	<input type="text"/>	to (ft.)	<input type="text"/>

9. CASING RECORD Upper 2 feet of casing removed 10. Date well was sealed
11. Licensed water well driller or other person approved by the Department performing well sealing

Name Complete License Number

Address City State Zip Code

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act-0863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center. IL 482-0631- Revised 5/09

Questions regarding the completion of this form should be directed to the local health department or the Illinois Department of Public Health 217-782-5830, TTY (for hearing impaired only) 800-547-0466.

Site Location:

SE Rockford Superfund Area 7
Remedial Action Completion

Project No.

1681-80527

Photo No.

1

Date:

12/16/10

Direction:

West

Description:

Gravel haul road installed by contractor between Ekberg/Pine Park and Alpine Road in December 2010.



Photo No.

2

Date:

12/21/10

Direction:

Description:

Equipment used for gravel haul road construction.



Photo No.

3

Date:

04/01/11

Direction:

Northwest

Description:

Site conditions at start of remedial action work after installation of security/silt fence.



Site Location:

 SE Rockford Superfund Area 7
Remedial Action Completion

Project No.

1681-80527

Photo No.
4
Date:
04/01/11

Direction:

Southwest

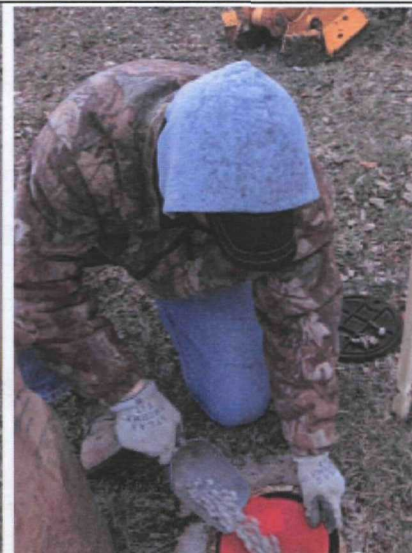
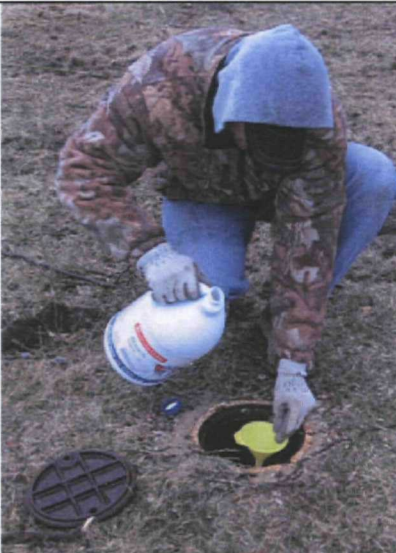
Description:

Site conditions at start of remedial action work after grubbing completed.


Photo No.
5
Date:
04/01/11

Direction:
Description:

Well abandonment activities – few drops of bleach, followed by slowly adding bentonite chips to the well.


Photo No.
6
Date:
04/01/11

Direction:
Description:

Well abandonment activities.



**CDM
Smith** PHOTOGRAPHIC LOG

Site Location:

SE Rockford Superfund Area 7
Remedial Action Completion

Project No.

1681-80527

Photo No.

7

Date:

04/05/11

Direction:

Description:

Several buried and smashed drums were found during excavation activities on April 5, 2011 and disposed of off-site along with contaminated soil loads.



Photo No.

8

Date:

04/05/11

Direction:

North

Description:

Grey "goo" oozing from a smashed drum.



Photo No.

9

Date:

04/12/11

Direction:

East

Description:

Several ounces of free product were observed in a small puddle at the base of the excavation on April 12, 2011. The approximate location of the free product is in the northeast corner of the southern excavation area.

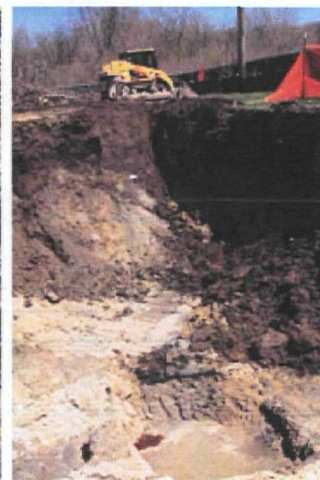


Photo No.
10**Date:**
04/12/11**Direction:**

Southeast

Description:

Site conditions during soil removal activities; photo taken from stairs of frac tank.

**Photo No.**
11**Date:**
04/12/11**Direction:**

East

Description:

Dust suppression activities.

**Photo No.**
12**Date:**
04/13/11**Direction:**

Northwest

Description:

Air monitoring equipment



**CDM
Smith** PHOTOGRAPHIC LOG

Site Location:
SE Rockford Superfund Area 7
Remedial Action Completion

Project No.
1681-80527

Photo No.

13

Date:

04/13/11

Direction:

Northwest

Description:

Air monitoring equipment



Photo No.

14

Date:

04/18/11

Direction:

South

Description:

Sheen was regularly observed on the surface of water in the excavation.



Photo No.

15

Date:

04/19/11

Direction:

Southeast

Description:

Excavation dewatering into onsite baker tank.



**CDM
Smith** PHOTOGRAPHIC LOG

Site Location:
SE Rockford Superfund Area 7
Remedial Action Completion

Project No.
1681-80527

Photo No.
16 **Date:**
04/19/11

Direction:

Southeast

Description:

Site progress during soil removal activities;
photo taken from stairs of frac tank.



Photo No.
17 **Date:**
04/20/11

Direction:

Northeast

Description:

Trucks hauling impacted soils are lined and
covered with poly sheeting.



Photo No.
18 **Date:**
04/20/11

Direction:

Southeast

Description:

Orange construction fence re-installed at the
end of each work day.



**CDM
Smith** PHOTOGRAPHIC LOG

Site Location:
SE Rockford Superfund Area 7
Remedial Action Completion

Project No.
1681-80527

Photo No.
19

Date:
04/21/11

Direction:

South

Description:

Random monitoring of haulers disposing at the proper landfill facility.



Photo No.
20

Date:
04/21/11

Direction:

Southeast

Description:

Backfilling and grading activities; view from stairs of frac tank.



Photo No.
21

Date:
04/27/11

Direction:

West

Description:

Transfer of excavation water from vac-truck to frac tank.





PHOTOGRAPHIC LOG

Site Location:
SE Rockford Superfund Area 7
Remedial Action Completion

Project No.
1681-80527

Photo No.
22

Date:
04/27/11

Direction:

North

Description:

Clean-out and decontamination of vac-truck after use.



Photo No.
23

Date:
04/27/11

Direction:

East

Description:

Solid waste material from vac-truck decontamination is disposed of at landfill along with remedial action soil disposal.



Photo No.
24

Date:
04/27/11

Direction:

South

Description:

Silt fencing maintained in good condition throughout duration of remedial action.



Photo No. 25	Date: 06/17/11
Direction: Southeast	
Description: Site grading completed.	

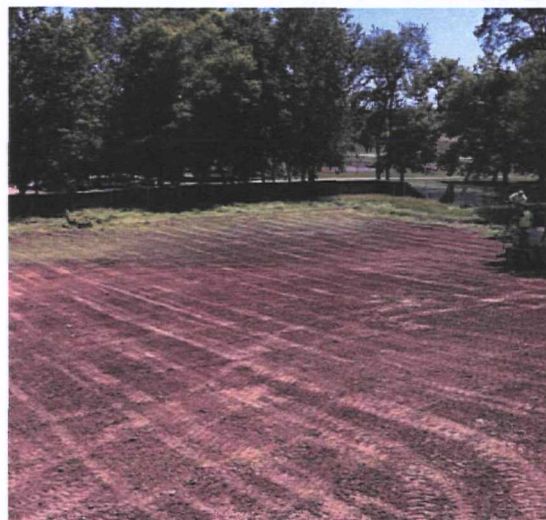


Photo No. 26	Date: 06/17/11
Direction: East	
Description: Seeding activities in progress.	



Photo No. 27	Date: 06/17/11
Direction: Southeast	
Description: Seeding of area completed.	



**CDM
Smith** PHOTOGRAPHIC LOG**Site Location:**
SE Rockford Superfund Area 7
Remedial Action Completion**Project No.**
1681-80527**Photo No.**
28 **Date:**
06/17/11**Direction:**

East

Description:Native grass re-growth and seeded areas
require additional seeding activities.**Photo No.**
29 **Date:**
08/12/11**Direction:**

Northwest

Description:Site conditions after remedial activities and
landscaping are complete.**Photo No.**
30 **Date:**
08/12/11**Direction:**

Northeast

Description:Site conditions after remedial activities and
landscaping are complete.

**CDM
Smith** PHOTOGRAPHIC LOG

Site Location:
SE Rockford Superfund Area 7
Remedial Action Completion

Project No.
1681-80527

Photo No.
31

Date:
08/12/11

Direction:

West

Description:

Site conditions after remedial activities and landscaping are complete.



Photo No.
32

Date:
10/31/11

Direction:

Northwest

Description:

Landscaping activities completed at the site on October 25, 2011.



Photo No.
33

Date:
10/31/11

Direction:

North

Description:

Landscaping activities completed at the site on October 25, 2011.

